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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
: 
Special Instructions to Filing Officer
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# Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 04/26/2024	_		##TT/AT E/	File Pales
			₩ALK	ТА~
ENTITY NAME TF Inv	est Group LLC			
DOCUMENT NUMBER	<u> </u>			
	**PLEASE FILE THE A	TTACHED AND RETURN**		
	Plain Copy			
	Certified Copy			
XXXXXXXXX	Certificate of Status-			
•	**PLEASE OBTAIN THE FOLL	OWING FOR THE ABOVE ENTITY**		
	Certified Copy of Arts &	Amendments		
	Certificate of Good Standing	ı.		
	**APOSTILLE' / NOT	TARIAL CERTIFICATION**		
COUNTRY OF DESTINA	ATION	<u> </u>	] 	
NUMBER OF CERTIFIC	PATES REQUESTED	·	_ 3	• •
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TOTAL OWED 130.00	<u> </u>	ACCOUNT #: 120160000072		] 
Please call Tina at	the above number hor anu	issues or concerns. Thank you so		

## COVER LETTER

TO:	New Filing Sec Division of Co				
SUBJEC		Group LLC			
SUBJE	c.i	Nar	ne of Limited Liab	pility Company	<del></del>
The enc	losed Articles of	*Organization and	fee(s) are submitt	ed for filing.	
Please re	eturn all correspo	ondence concernin	g this matter to the	e following:	
	Klara Fishm	an-Sitbon			
			Name	of Person	
	Law Offices	of Fishman-Sitbo	n, P.A.		
			Firm/0	Company	
	20900 NE 3	0th Ave. Suite 835			
			Ad	dress	
	Aventura, F	L 33180			
	1.5.1	1 1 .	City/State	and Zip Code	
	kfishman@fs	<del></del>	be used for future	e annual report notifica	ntion)
For furthe		oncerning this matte			,
	Klara Fishma	an-Sitbon	786 at (	529-2480	. 73
Enclosed		ne of Person  he following amou	Area Code	Daytime Telepho	one Number
<b>□\$</b> 125.	.00 Filing Fee	■\$130.00 Filin Certificate of S	tatus Cert	55.00 Filing Fee & ified Copy onal copy is enclosed)	☐S160.00 Filing Fee. Certificate of Status & Certified Copy. (additional copy is enclosed)
	New F Division	ng Address Filing Section on of Corporations Box 6327	1	Street Address New Filing Section I The Centre of Talla 2415 N. Monroe Str	hassee rect, Suite 810
	Tallah	assee, FL 32314		Tallahassee, FL 323	303

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
II - Address:	
g address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
50 S Pointe Dr. #1704	369 Redfem Ave.
Miami Beach, FL 33139	Westmount, QC H3Z 2G4, Canada

The name and the Florida street address of the registered agent are:

Law Offices of Fishi	nan-Sitbon, PA	
	Name	
20900 NE 30th Ave.	Suite 835	
Florida street addres	ss (P.O. Box <u><b>NOT</b></u> ac	cceptable)
Aventura,	FL	33180
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

### ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Viacheslav Tumanov
	369 Redfem Ave.
	Westmount, OC H3Z 2G4, Canada
MGR	Artashes Toumanov
MON	369 Redfern Ave.
	Westmount, OC H3Z 2G4, Canada
<del> </del>	
	<del></del>
(Use attachment if necessary)	
CLE V: Effective date, if other than effective date is listed, the date muste of filing.)  If the date inserted in this block document's effective date on the Department of t	the date of filing:
CLE V: Effective date, if other than effective date is listed, the date mule of filing.)  If the date inserted in this block document's effective date on the Department's effective date on the Department of the	oes not meet the applicable statutory filing requirements, this date will not be ligartment of State's records.
CLE V: Effective date, if other than effective date is listed, the date muse of filing.)  If the date inserted in this block document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will not be ligartment of State's records.
CLE V: Effective date, if other than effective date is listed, the date mule of filing.)  If the date inserted in this block document's effective date on the Department's effective date on the Department of the	oes not meet the applicable statutory filing requirements, this date will not be ligartment of State's records.
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Klara Fishman-Sitbon, Eso, as Authorized Representative
Typed or printed name of signee

Filing Fees:

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)