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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FELDMAN & ASSOCIATES

Account Number : I20130000018 Phone : (305)931-0433 Fax Number : (866)856-1462

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: paul@feldmanclosings.com

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SECRETARY OF STATE IS FOR STATE IN STAT

FLORIDA LIMITED LIABILITY CO.

Bambino Entertainment, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	S125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bambino Entertainment, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
17141 Collins Ave. #4501	17141 Collins Avc, #4501
Sunny Isles Beach, FL 33160	Sunny Isles Beach, FL 33160

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Paul Feldman, Esc	<u>}.</u>	
	Nim	
2750 NE 185th Su	reet. Suite 203	
Florida street addi	ress (P.O. Box <u>NOT</u> ac	cceptable)
Aventura	FL	33180
Ch/	State	Zin

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. Thereby accept the appointment as registered agent and agree to act in Fis 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 Capter 605. IS

Registered Agent's Signature (REQ) RED

(CONTINUED)



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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Lipaz Schwartz 17141 Collins Aye, #4501 Sunny Isles Beach, FL 33160
(Use attachment if necessary)	
(If an effective date is listed, the date must be the date of filing.)	date of filing:
ARTICLE VI: Other provisions, if any.	
REOUIRED SIGNATURE:	To Tall
This document is ex-	member or an authorized representative of a member, ecuted in accordance with section 605.0203 (1) (b), Florida Statutes, alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
<u>Paul Feldman</u>	Typed or printed name of sign ←

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)