

To:

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2024-06-10 20:21:22 GMT

13053284774

From: Yanet Avila

6/7/24, 2:50 PM

L24-000258076

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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RECEIVED
2024 JUN 10 PM 4:43

**FLORIDA LIMITED LIABILITY CO.
ENZ DEVELOPMENT GROUP LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ENZ Development Group 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:17555 Collins Ave, unit #802
Sunny Isles Beach, FL 33160Mailing Address:SAME

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:

Eleonora Sebos

Name

17555 Collins Ave, unit #802Florida street address (P.O. Box NOT acceptable)Sunny Isles Beach FL 33160

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)

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From: Yanez Avila

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Eleonora Sebos

17555 Collins Ave, unit #802 Sunny Isles Beach, FL, 33160

AMBR

Zeev Gareev

46 Prunella Cres Holand Landing, ON, L9N 0S7

AMBR

Natalie Vilenkin

454 Weburn Ave, North York, ON, M5M 1L7

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.