Division of Corporations Electronic Filing Cover Sheet

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(((H24000204540 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone : (305)552-5973 Fax Number : (305)675-5944

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

Email	Address:

FLORIDA LIMITED LIABILITY CO. R.M.L LANDSCAPING LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADDITION
ARTICLE I. Name.
The name of the Limited Liability Company is:
or the Limited Liability Company
ompany is:
2 . // /
ARTICLE II - Address:
- Landerson / /
APTICION OF THE PROPERTY OF TH
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability
Company address and street address of the
Company is:
7010 SW 16 Stree Higmi Florida
$\frac{-2010}{100}$ 50) $\frac{1}{100}$ 6 c+
2/ree High T
133 / F/ORI da
- 33/55
APTICIPM
ARTICLE III - Registered Agent, Registered Office:
The name and the Florida street address of the registered agent are: (The Limited Liability with an active Florida registration.)
Company corner and the Fiorida street address of the register
Company cannot serve as its own Registered Agent. You must designate an individual or another business entity
must designate an individual or another husiness and lability
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Bebeca Nonocas
Debeca Meneses
#
7010 SW 165/20 001
7010 SW 165tree Aliami +/2=1
the street of th
- 33/55 (1911) 1-10RIVA
ARTICLE IV
THAT ICLE IV
The name and title of each person authorized to manage and control the Limited
Liability Company: (MGR or AMBR)
Company: (MGR or AMBR)
1906,000 0/
TREECA DENESES (AMBR)
TREE (a Geneses (AMBR)

Required Signatures:

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

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Typed or printed name of signee

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)