Florida Department of State

Division of Corporations
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To:

Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
Phone : (305)552-5973
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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. CONQUERING MULTISERVICES LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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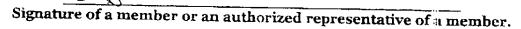
Help

ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Conquering Multiscruices LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
93205W385T MiaMi F/ 33165	
SEC SEC	
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited' Instritive Company cannot serve as its own Registered Agent. You must designate an individual or another business entity: With an active Florida registration.) Fig. 12. 13. 16. 5. 16. 16. 16. 16. 16. 16. 16. 16. 16. 16	
9320 SW 38 ST Miami F/33165.	
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR) Paderel (Molong Feec 3 (AMBR))	

Required Signatures:



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.

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 (REOUIRED)