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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.

Account Number : I20070000019 Phone : (518)689-1212 Fax Number : (518)432-0742

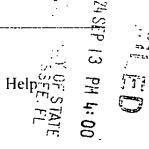
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FLORIDA LIMITED LIABILITY CO. Provision Kitchen & Bath of Miami LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu



Articles of Organization

for

Florida Limited Liability Company

ARTICLE I NAME

The name of the Limited Liability Company is:

Provision Kitchen & Bath of Miami LLC

ARTICLE II PRINCIPAL OFFICE

The mailing address and street address of the principal office is:

121 NE 34TH ST, STE 916, MIAMI, FL 33137 Mailing Address: 6245 WILSHIRE BLVD., APT 1306, LOS ANGELES, CA 90048

ARTICLE III REGISTERED AGENT. REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

ILAN NIZER 121 NE 34TH ST, STE 916, MIAMI, FL 33137

ARTICLE IV AUTHORIZED REPRESENTATIVE / MANAGER

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

ILAN NIZER, Authorized Member 121 NE 34TH ST, STE 916, MIAMI, FL 33137

September 12, 2024

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.

<u>s/ILAN NIZER</u> ILAN NIZER Registered Agent

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.

<u>s/ILAN NIZER</u> ILAN NIZER Authorized Member

