# L24000422958

| <i>5</i> ₽.                                   |                       |           |
|---|-----------------------|-----------|
|   |                       |           |
|   | (Requestor's Name)    |           |
|   |                       |           |
| <del></del> ————————————————————————————————— | (Address)             |           |
|   |                       |           |
|   |                       |           |
|   | (Address)             |           |
| ,<br>re                                       |                       |           |
|   | (City/State/Zip/Phone | #)        |
|   |                       |           |
| PICK-   | UP   WAIT             | MAIL      |
|   | о. <u>Г</u>           | L.J       |
|   |                       |           |
|   | (Business Entity Name | <br>e)    |
|   | •                     |           |
|   |                       |           |
| · <u>·</u>                                    | (Document Number)     |           |
|   |                       |           |
| Certified Copies                              | Certificates of       | of Status |
|   | <del></del>           |           |
| a   |                       |           |
| Special Instruction                           | ons to Filing Officer |           |
|   |                       |           |
| <del></del>                                   |                       |           |
| _   |                       |           |
| ·<br>=  |                       |           |
|   |                       |           |
| ~   |                       |           |
|   |                       |           |
|   |                       |           |
| **  |                       |           |
| •   | Office Use Only       | f         |
| <del>-</del>                                  |                       |           |
| inan m  |                       |           |
| ,   |                       |           |
| 1-1   |                       |           |
| <b>↓-</b> .                                   |                       |           |
| Σ¢.   |                       |           |



600436604836

74 NCT = 7 PM 3:

RECEIVED

FLORIDA CAPFTAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243

| Please use funds from the account 12 Authorization Signature: |  |
|---|--|
| ENSIS LLC<br>Business   | Document #   |
| Walk in   | Will wait  |
| Certified Copies of the Articles of Or Certificate of Status  | ganization   |
| NEW FILINGS   | <u>AMENDMENTS</u> ≅  |
| Profit Not for Profit LLC Domestication INC CORP OTHER        | X_AmendmentResignation of R.A. Officer/DirectorChange of Registered AgentDissolution/WithdrawalConversionStatement of CorrectionMerger |
| OTHER FILINGS   | REGISTRATION/QUALIFICATIONS  |
| Annual Report   | Foreign Filing Partnership   |
| Fictitious Name   | Reinstatement  CORRECTION for a Foreign LLC  |
| Statement of Authority  | <u></u>  |
| APOSTIL   | Domestication of a Foreign Corp.   |
| COUNTRY   | Other  |
| EXAMINER'S INITIALS:  |  |

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243

| Please use funds from the account 12 Authorization Signature:  | 20210000160: <u><b>#</b> 1:25.00</u>        |
|--|---|
| ENGIS LLC  | •   |
| Business   | Document #                                  |
| Walk in  | Will wait                                   |
| Certified Copies of the Articles of O<br>Certificate of Status | rganization                                 |
| NEW FILINGS  | <u>AMENDMENTS</u>                           |
| Profit Not for Profit LLC Domestication INC CORP OTHER         | X _ Amendment                               |
| OTHER FILINGS  | REGISTRATION/QUALIFICATIONS                 |
| Annual Report  | Foreign Filing Partnership                  |
| Fictitious Name  | Reinstatement  CORRECTION for a Foreign LLC |
| Statement of Authority   |   |
|  | Domestication of a Foreign Corp.            |
| APOSTIL  |   |
| COUNTRY  | Other                                       |
| EXAMINER'S INITIALS:   |   |

# COVER LETTER

|                | Vew Filing Secti<br>Division of Corp |   |                   |  |   |             |
|----------------|--------------------------------------|---|-------------------|--|---|-------------|
| OY) III YII AY | ENSIS LLC                            |   |                   |  |   |             |
| SUBJECT        | I:                                   | Name of J   | Limited Liabilit  | y Company  |   |             |
| The enclos     | sed Artic <b>les</b> of (            | Organization and fee(s)                                 | are submitted:    | for filing.  |   |             |
| Please reti    | urn all correspor                    | ndence concerning this                                  | matter to the fo  | illowing:  |   |             |
|                | SNYDER IN                            | TERNATIONAL LAV   | V GROUP           |  |   |             |
|                |                                      |   | Name of           | Person   |   | •           |
|                | ALISHA EZF                           | ::<br>LL  |                   | ,  |   | 207         |
|                |                                      |   | Firm/Co           | npany  | ····  | 2024 OCT    |
|                | 21500 BISCA                          | YNE BLVD  |                   |  |   |             |
|                | -                                    |   | Addre             | SS   |   | 里           |
|                | SUITE 401                            |   |                   |  |   | AH 9: 1,7   |
|                |                                      |   | City/State and    | l Zip Code   |   |             |
|                | AVENTURA,                            | FL 33180<br>-mail address: (to be us                    | and for future or | and a second a self assistant  |   |             |
| For further    |                                      | cerning this matter, ple                                |                   |  | onj   |             |
|                | alisha eze                           | LL<br>at  | 786<br>(          | 899-2880<br>)  |   |             |
|                | Name                                 | of Person   | Area Code         | Daytime Telephon   | e Number  |             |
| Enclosed       | is a check for th                    | e following amount:                                     |                   |  |   |             |
|                | 0 Filing Fee                         | □\$130.00 Filing Fee<br>Certificate of Status           | Certifie          | i.00 Filing Fee & ed Copy I copy is enclosed)  | □\$160.001<br>Certificate<br>Certified Co<br>(additional co | of Status & |
|                | New Fil                              | Address<br>ling Section<br>n of Corporations<br>ox 6327 | ì                 | Street Address<br>New Filing Section Di<br>The Centre of Tallah<br>2415 N. Monroe Stre | issee   |             |

Tallahassee, FL 32303

Tallahassee, FL 32314

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:<br>The name of the Limited Liabili  | ty Company is:   |   |   |                         |
|---|--|---|---|-------------------------|
| ENSIS LLC<br>(Must cont   | tain the words "Limited I  | Liability Con                                     | pany, "L.L.C.," or "LI.C.")   |                         |
| ARTICLE II - Address:<br>The mailing address and street a   | ddress of the principal of   | ffice of the L                                    | imited Liability Company is:  |                         |
| <u>Princip</u>  | al Office Address:   |   | Mailing Address:  |                         |
| 11174 NW 72 PLAC<br>PARKLAND, FL 33   |  |   | 11174 NW 72 PLACE<br>PARKLAND, FL 33076   | <u> </u>                |
| ARTICLE III - Registered Ag<br>(The Limited Liability Company<br>another business entity with an<br>The name and the Florida street | y cannot serve as its own active Florida registratio address of the registered   | Registered A                                      | l Agent's Signature:<br>gent. You must designate an individual or   | 2024 OCT -7             |
|   | SERGII KRYTSOV   | Name  | ·   | ·                       |
|   | 11174 NW 72 PLAC   | T.  |   | Ai.                     |
|   | Florida street address   |   | NOT acceptable)   | 9.<br>14.               |
|   | PARKLAND   | FL  | 33076   | m -                     |
|   | City   | State   | Zip   |                         |
| place designated in this certificate further agree to comply with the p   | n, I hereby accept the approvisions of all statutes rebligations of my positions af my positions af my positions at my positio | pingment as re<br>elating to the<br>as registered | for the above stated limited liability compared istered agent and agree to act in this cape proper and complete performance of my duagent as provided for in Chapter 605, F.S  Signature (REQUIRED) | acity. I<br>ties, and I |
|   |  | (CONTIN   | UED)  |                         |

## ARTICLE IV-

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

| "AMBR" = Authorized Member   | Name and Address:  |
|--|--|
| "MGR" = Manager  MGR   | SERGII KRYTSOV<br>11174 NW 72 PLACE                                      |
|  | PARKLAND, FL 33076   |
|  |  |
|  |  |
|  |  |
|  | 2024 057   |
|  |  |
|  |  |
|  |  |
| (Use attachment if necessary)  |  |
| LEV: Effective date, if other than the d   | date of filing: OCTOBER 7, 2024 (OPTIONAL).:                             |
| LEV: Effective date, if other than the diffective date is listed, the date must be a of filing.)   | specific and cannot be more than five business days prior to 01:300 c    |
| LEV: Effective date, if other than the diffective date is listed, the date must be of filing.) If the date inserted in this block does not be of the date inserted in this block does not be only the date inserted in this block does not be determined.  | ot meet the applicable statutory filing requirements, this date will not |
| LEV: Effective date, if other than the diffective date is listed, the date must be a of filing.) If the date inserted in this block does not ment's effective date on the Department of the Department.  | ot meet the applicable statutory filing requirements, this date will not |
| LEV: Effective date, if other than the diffective date is listed, the date must be a of filing.) If the date inserted in this block does not ment's effective date on the Department of the Department.  | ot meet the applicable statutory filing requirements, this date will not |
| CLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)  If the date inserted in this block does not ment's effective date on the Department of the D | ot meet the applicable statutory filing requirements, this date will not |
| LEV: Effective date, if other than the diffective date is listed, the date must be a of filing.) If the date inserted in this block does not ment's effective date on the Department LEVI: Other provisions, if any.   | ot meet the applicable statutory filing requirements, this date will not |
| CLE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)  If the date inserted in this block does not cument's effective date on the Department of the | ot meet the applicable statutory filing requirements, this date will not |

### 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)