12/2/24, 5:15 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000397126 3)))



H2490039712634BC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. S. CHATHAM DEC - 9 2024 Doing so will generate another cover sheet.

To:

Division of Corporations

strationes deciminalment here en contra cont

Fax Number : (850)617-6381

From:

Account Name : BETAM PROFESSIONAL SERVICES INC.

Account Number : I20220000175 : (305)810-9437 Fax Number : (305)630-8407

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

Email Address: info@elitep-group.com

## FLORIDA LIMITED LIABILITY CO. PRCA CAPITAL LLC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

H240003971263

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - Name:

The name of the Limited Liability Company is: Glust end with the words "Limited Liability Company." LLC.," or "LLC.")

PRCA CAPITAL LLC.

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

830 86TH ST MIAMI BEACH, FL 33141

### ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Lightling Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

ALMARAY SINAHI CEGARRA 830 86TH ST MIAMI BEACH, FL 33141

#### ARTICLE IV-

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

ALMARAY SINAHI CEGARRA, (MGR) 830 86TH ST MIAMI BEACH, FL 33141

H240003971263

PILED

1024 DEC -9 AM 10: 1:

SECRETARY OF STAT

TALLATINSSEE, FL

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.

Almaray Sirahi Cegaira
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)