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DATE: 01/03/2025

.

NAME: LOTUS FLOWER ENTERPRISES, LLC

TYPE OF FILING: ARTICLES

COST: 155.00

RETURN: Curfifed COPY PLEASE

ACCOUNT: FCA00000015



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Lotus Flower Enterprises, LLC	
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(Must end with the words "Limited Liability	v Company, "L.L.C.," or "LLC.")
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ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
5153 4th Avenue N St. Petersburgh, FL 33710	5153 4th Avenue N St. Petersburgh, FL 33710	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

another business entity with an active Florida registration.)

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

REGISTERED AGENT SOLUTIONS. INC.

Name

2894 Remington Green Lane. Suite A Florida street address (P.O. Box <u>NOT</u> acceptable)

<u>Tallahassee Fi, 32301</u> City Zip

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. Sandra Linares, Assistant Secretary Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV-

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

MGR" = Manager		
/IGR / AMBR		
	5153 4th Avenue N	
	St. Petersburgh, FL 33710	
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ARTICLE V: Effective date, if other than the date of filing: _______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Mich / le Farazi (Jan 2, 2025 19.41 EST)

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.)

MICHELLE FARAZI

Typed or printed name of signee

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)

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