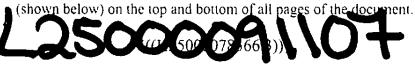
Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

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Account Number : I20220000042 Phone : (786)370-2432 Fax Number : (786)866-6349

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

manoloian2004@yahoo.com Email Address:

FLORIDA LIMITED LIABILITY CO. PREZPOWER FENCING CLUB LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

From: ADRIAN MEDINA

(((H25000078366 3)))

ARTICLESO	ORGANIZATION FOR FLORIDA	LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liabilit	y Company is:			
F	PREZPOWER FENC	CING CLUB LLC		
(Must contr	in the words "Limited Liability C	ompany, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street ad	dress of the principal office of the	e Limited Liability Company is:		
Principal Office	Address:	Mailing A	ddress:	
200 BONAVENT		_9449 SW 76TH	ST APT T8	
WESTON, FL 33	3326	MIAMI, FL 3317		_
another business entity with an a		d Agent. You must designate an indiv	idual or	
		INOSA, JUAN M.		
		ime		
	9449 SW 76Th Florida street address (P.O. Bo			
	MIAMI	FL 33173		
	City	Zip		
place designated in this certificate, further agree to comply with the pro	I hereby accept the appointment a ovisions of all statutes relating to the ligations of my position as register	ess for the above stated limited liability is registered agent and agree to act in the the proper and complete performance of the agent as provided for in Chapter 60 to Signature (REQUIRED)	this capacity. I of my duties, and I	
	(CONT)	INUED)	2025 MAR -3 PH 4: 15 SECRETARY OF STATE TALLAHASSEE, FL	

From: ADRIAN MEDINA

(((H25000078366 3)))

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	CAMPANA ESPINOSA, JUAN M.
AMBR	9449 SW 76TH ST APT T8
	MIAMI, FL 33173
<u>.</u>	
ective date is listed, the date must be sp of filing.)	e of filing: (OPTIONAL) sectific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as of State's records.
E V: Effective date, if other than the date ective date is listed, the date must be sp of filing.) the date inserted in this block does not a ment's effective date on the Department	pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as
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