

M2000012499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

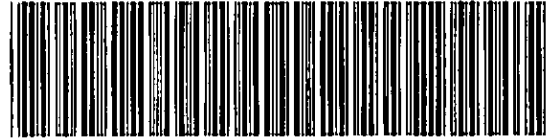
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100392165011

08/08/22--01020--035 \*\*125.00

FILED  
2022 AUG - 8 PM 5:48  
STATE  
OF FLORIDA

T. LEMIEUX

AUG 10 2022

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Fredo Bang, LLC  
\_\_\_\_\_  
Name of Limited Liability Company

Enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Incorporation, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

All correspondence concerning this matter to the following:

DIANA AGENOR  
\_\_\_\_\_  
Name of Person  
  
\_\_\_\_\_  
Firm/Company  
  
15476 NW 77 CT #272  
\_\_\_\_\_  
Address  
  
Miami Lakes, FL 33016  
\_\_\_\_\_  
City/State and Zip Code  
  
Bangbizentertainment@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

|                                 |            |   |
|---------------------------------|------------|---|
| Diana Agenor                    | 347        | 776-0719                                    |
| _____<br>Name of Contact Person | at (_____) | _____<br>Area Code Daytime Telephone Number |

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Fredo Bang, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Louisiana  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 88-1150875  
(FEI number, if applicable)

4. 4/1/2022  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 15476 nw 77 ct #272  
(Street Address of Principal Office)

6. 15476 nw 77 ct #272  
(Mailing Address)

Miami Lakes, FL 33016

Miami Lakes, FL 33016

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

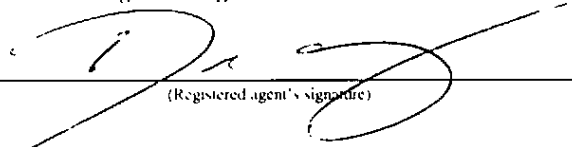
Name: Diana Agenor

Office Address: 15476 NW 77 ct #272

Miami Lakes, 33016  
(City) Florida (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
(Registered agent's signature)

FILED  
2022 AUG - 8 PM 5:48  
TALLAHASSEE, FL 32309

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

**Title or Capacity:**                      **Name and Address:**

☒ Manager      Name: Fredrick Givens

☒ Member      Address: 15476 NW 77 ct #272

☒ Authorized      Miami Lakes, FL 33016

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

**Title or Capacity:**                      **Name and Address:**

☒ Manager      Name: Diana Agenor

☐ Member      Address: 15476 NW 77 ct #272

☐ Authorized      Miami Lakes, FL 33016

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

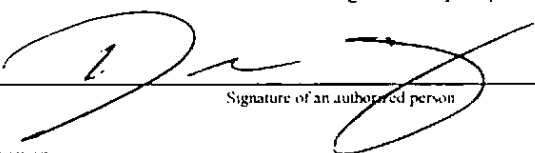
Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

  
\_\_\_\_\_  
Signature of an authorized person

Diana Agenor  
\_\_\_\_\_  
Typed or printed name of signer

R. Kyle Ardoin  
SECRETARY OF STATE

State of Louisiana  
Secretary of State



03/14/2022

ONLINE FILING  
fredobang1996@gmail.com

COMMERCIAL DIVISION  
225.925.4704

Administrative Services

225.932.5317 Fax

Corporations

225.932.5314 Fax

Uniform Commercial Code

225.932.5318 Fax

FREDO BANG LLC

It has been a pleasure to approve and place on file your articles of organization. The appropriate evidence is attached for your files.

Payment of the filing fee is acknowledged by this letter.

In addition to email and text notifications, business owners now have the option to enroll in our secured business filings (SBF) service. This service is available online, at no charge, by filing a notarized affidavit. Upon enrollment, an amendment cannot be made to your entity without approval using your personal identification number. This is another way to protect your business from fraud and identity theft.

Please note that as of January 1, 2018, business owners in the following parishes will be required to file all available business documents online through **geauxBIZ**: Ascension, Bossier, Caddo, Calcasieu, East Baton Rouge, Jefferson, Lafayette, Livingston, Orleans, Ouachita, Rapides, St. Tammany, Tangipahoa and Terrebonne.

Online filing options are available if changes are necessary to your registration or if you need to file an annual report. Please visit our website at **GeauxBiz.com** for your future business needs.

Sincerely,

The Commercial Division  
WEB

R. Kyle Ardoin  
SECRETARY OF STATE

State of Louisiana  
Secretary of State



March 14, 2022

COMMERCIAL DIVISION  
225.925.4704

Administrative Services

225.932.5317 Fax

Corporations

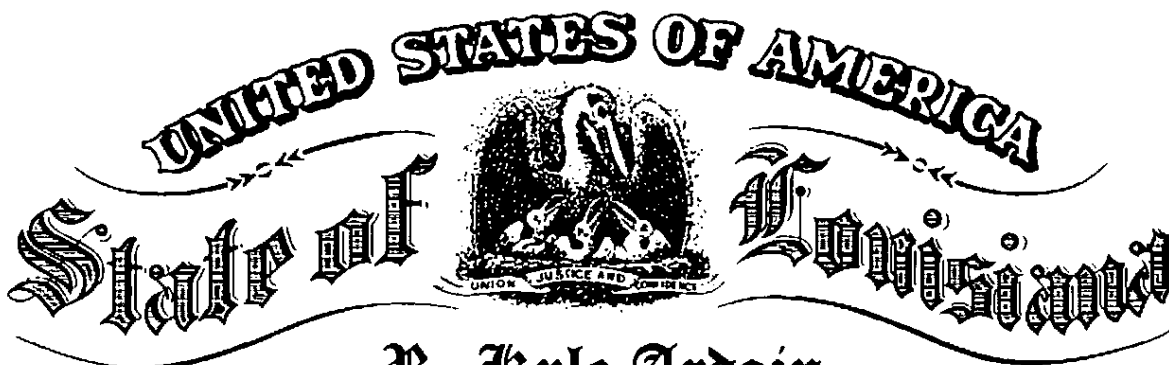
225.932.5314 Fax

Uniform Commercial Code

225.932.5318 Fax

The attached document of FREDO BANG LLC was received and filed on March 14, 2022.

WEB 44838917K



**R. Kyle Ardoin**  
SECRETARY OF STATE

*As Secretary of State of the State of Louisiana, I do hereby Certify that*

a copy of the Articles of Organization and Initial Report of

**FREDO BANG LLC**

Domiciled at ZACHARY, LOUISIANA,

Was filed and recorded in this Office on March 14, 2022,

And all fees having been paid as required by law, the limited liability company is authorized to transact business in this State, subject to the restrictions imposed by law, including the provisions of R.S. Title 12, Chapter 22.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

March 14, 2022

*Secretary of State*

WEB 44838917K



Certificate ID: 11540403#VMJ62

To validate this certificate, visit the following web site, go to **Business Services**, **Search for Louisiana Business Filings**, **Validate a Certificate**, then follow the instructions displayed.  
[www.sos.la.gov](http://www.sos.la.gov)

**STATE OF LOUISIANA**  
**ARTICLES OF ORGANIZATION**

**(R.S. 12:1301)**

**1. The name of this limited liability company is:**

FREDO BANG LLC

**2. This company is formed for the purpose of:**

ENGAGING IN ANY LAWFUL ACTIVITY FOR WHICH LIMITED LIABILITY COMPANIES  
MAY BE FORMED

**3. The duration of this limited liability company is: (may be perpetual):**

**4. This company is:**

MEMBER-MANAGED

**Other provisions:**

**The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the  
filer to fine or imprisonment or both under R.S. 14:133.**

BY TYPING MY NAME BELOW, I HEREBY CERTIFY THAT I AM THE ORGANIZER.

**ELECTRONIC SIGNATURE:** DIANA AGENOR (3/10/2022)

**TITLE:** MANAGER

**LIMITED LIABILITY COMPANY INITIAL REPORT**

**(R.S. 12:1305 (E))**

**The name of this limited liability company is:**

FREDO BANG LLC

**The location and municipal address (not a P.O. Box only) of this limited liability company's  
registered office:**

6734 SUMMERLIN DR  
ZACHARY, LA, 70791

**Mailing Address:**

15476 NW 77TH CT #272  
HIALEAH, FL, 33016

**The full name and municipal address (not a P.O. Box only) of each of this limited liability  
company's registered agent(s) is/are:**

DIANA AGENOR  
6734 SUMMERLIN DR  
ZACHARY, LA, 70791

**The name and municipal address (not a P.O. Box only) of the managers or members:**

FREDRICK GIVENS (MEMBER)  
67734 SUMMERLIN DR  
ZACHARY, LA, 70791

DIANA AGENOR (MANAGER)  
6734 SUMMERLIN DR



ZACHARY, L.A. 70791

**The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to fine or imprisonment or both under R.S. 14:133.**

BY TYPING MY NAME BELOW, I HEREBY CERTIFY THAT I AM THE ORGANIZER.

**ELECTRONIC SIGNATURE:** DIANA AGENOR (3/10/2022)

**TITLE:** MANAGER

**SECRETARY OF STATE**



**Agent Affidavit and Acknowledgement of Acceptance**

**Charter Number:** 44838917K

**Charter Name:** FREDO BANG LLC

**The agent / agents listed below accept the appointment of registered agent for and on behalf of the Charter Name above.**

| <b>Date Responded</b> | <b>Agent(s)</b> |
|-----------------------|-----------------|
| 03/14/2022            | DIANA AGENOR    |

| <b>Agent(s) Electronic Signature</b> |
|--------------------------------------|
| DIANA AGENOR                         |