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Florida Department of State  
Division of Corporations  
Electronic Cover Sheet

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To: Division of Corporations  
 Fax Number : (850) 617-6381

From: Account Name : CLARA GIRALDO ENROLLED AGENT  
 Account Number : 119990008017  
 Phone : (305) 485-9300  
 Fax Number : (305) 485-1098

2021 AUG -4 AM 10:18

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

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
LAKROP PROFESSIONAL, LLC.

Certificate of Status	0
Certified Copy	1
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AUG 05 2021

T. SCOTT

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
OF**

**LAKROP PROFESSIONAL, LLC.**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**LAKROP PROFESSIONAL, LLC.**

**ARTICLE II - ADDRESS**

The principal office of the Limited Liability Company is:

**340 W FLAGLER ST APT 1010  
MIAMI, FL. 33130**

The mailing address shall be:

**340 W FLAGLER ST APT 1010  
MIAMI, FL. 33130**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:**

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

**LEIDY KAROLINA RODRIGUEZ PENA**

**340 W FLAGLER ST APT 1010  
Florida Street address (P.O.BOX NOT acceptable)  
MIAMI, FL. 33130  
City, State, and Zip**

2021 AUG -4 AM 10:18  
FILED AT THE OFFICE OF THE  
CLERK OF THE CIRCUIT COURT  
IN AND FOR THE COUNTY OF  
MIAMI, FLORIDA

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.



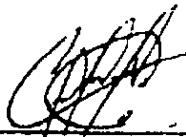
**REGISTERED AGENT'S SIGNATURE**

**ARTICLE IV- MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**LEIDY KAROLINA RODRIGUEZ PENA**  
**340 W FLAGLER ST APT 1010**  
**MIAMI, FL. 33130**

**AMBR**



**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.)

**LEIDY KAROLINA RODRIGUEZ PENA**  
Typed or printed name of signee