

L23000122008

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

From: Account Name : FASTKIT CORP
Account Number : 120100000009
Phone : (305)599-0839
Fax Number : (305)592-9591

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.
LR NURSERY LLC

Table with 2 columns: Description and Value. Rows include Certificate of Status (0), Certified Copy (1), Page Count (02), and Estimated Charge (\$155.00).

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2023 MAR 15 PM 10:33
TALLAHASSEE FL

Handwritten mark

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LR NURSERY LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

OLIMPIA Y COREA
18655 SW 200TH STREET
MIAMI FL 33187

18655 SW 200TH STREET
MIAMI FL 33187

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

OLIMPIA Y COREA
Name

18655 SW 200TH STREET
Florida street address (P.O. Box NOT acceptable)

MIAMI FL 33187
City State Zip

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CLERK OF STATE
TALLAHASSEE, FL

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.

Olimpia Corea

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member	OLIMPIA Y COREA
"MGR" = Manager	18655 SW 200TH STREET
MGR	MIAMI FL 33187

(Use attachment if necessary)

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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

DEPARTMENT OF STATE
 TALLAHASSEE, FL
 2023 MAR 15 PM 10:36
 FILED

REQUIRED SIGNATURE:

Olimpia Corea

Signature of a member or an authorized representative of a member.
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.

OLIMPIA Y COREA

Typed or printed name of signer

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)