

**L24000317587**

Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : FOREING SOLUTION  
Account Number : I20200000036  
Phone : (786)599-4140  
Fax Number : (954)827-2771

**\*\*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.**

**Zyrcadian LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

2024 JUL 18 PM 12:00  
RECEIVED  
2024 JUL 18 AM 11:49  
REGISTRATION  
DIVISION

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")*

Zyrcadian LLC

**ARTICLE II - Address:**

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

7300 W Mcnab Road Suite 220  
Tamarac, FL 33321

**ARTICLE III - Registered Agent, Registered Office:**

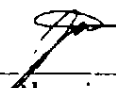
The name and the Florida street address of the registered agent are: *(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)*

Foreign Solution 2.0 LLC  
2200 N. Commerce Parkway, Suite 200  
Weston, FL 33326

**ARTICLE IV-**

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

Mario Luis Fuks - MBR  
Claudia Victoria Jaitman - MBR  
ERICK LEANDRO FUKS - MGR

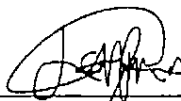
**Required Signatures:****Signature of a member or an authorized representative of a member.**

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.

**Mario Luis Fuks****Typed or printed name of signee**

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 (REQUIRED)**

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