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# FLORIDA LIMITED LIABILITY CO.

# 7023 LLC

Certificate of Status	0
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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# ARTICLE I - Name: The name of the Limited Liability Company is: 7023 LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LEC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 7021-23 SW 13 TERR 7021-23 SW 13 TERR MIAMI, FL 33144 MIAMI, FL 33144 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: AARON GABRIEL ABRAHAM Name 7021-23 SW 13 TERR Florida street address (P.O. Box NOT acceptable)

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.

State

MIAMI

City

Aaron G. Abraham Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	AARON GABRIEL ABRAHAM 7021-23 SW 13 TERR MIAMI, FL 33144
(Use attachment if necessary)	
n effective date is listed, the date must be s inte of filing.)	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed it of State's records.
TCLE VI: Other provisions, if any.	

Agron C. Abraham Aaron G Abraham (Feb 11, 2023 16 52 EST)

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.

AARON GABRIEL ABRAHAM

Typed or printed name of signee

# 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)