

03/17/20

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#3933 P.001/003

Florida Department of State
Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
QUATTRO CASTELLA LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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TALLAHASSEE, FLORIDA

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LLC ARTICLES

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is :

QUATTRO CASTELLA LLC
(Must end with the words "Limited Liability Company", "L L C" or "LLC")

ARTICLE II - Address:

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

Principal Office Address

Mailing Address:

4717 N W 7 Street , 507 -10

The Same Address

MIAMI, FL 33126

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TALLAHASSEE, FLORIDA

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot 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:

Carline Di Mario
Name

4717 NW 7 St. 507-10

Florida street address (P.O.Box NOT acceptable)

Miami, FL 33126
City, State, and Zip

Having been named as registered agent 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.

Carline Di Mario
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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LLC ARTICLES

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and address:</u>
"MGR" = Manager MGRM- Managing	
<u>MGR</u>	<u>Carline Di Mario</u> <u>4717 NW 7 ST. - 507</u> <u>Miami FL 33126</u>
<u>MGR</u>	<u>Claudio Sitzla</u> <u>Investor ; Allen resident</u>
<u>MGRM</u>	<u>Catherine Macias</u> <u>4717 NW 7 Street - 507-10</u> <u>Miami Fl. 33126</u>
<u>MGRM</u>	<u>Magin Macias</u> <u>Honorary Accountant,</u> <u>The Same Address</u>

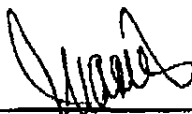
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing; May, 31/14 (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)

REQUIRED SIGNATURE:



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

(In accordance with section 605 Florida Statutes, the execution of this document constitutes and 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.)

Magin Macias
 Typed or printed name of signer

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