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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : US TAX CONSULTING INC

Account Number : 120160000060 Phone

: (407)674-8969

Fax Number

: (407)674-8970

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

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FLORIDA LIMITED LIABILITY CO. J. M. HOSPITALITY & COMFORT LLC

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SEP 22 2016

ARTICLES OF ORGANIZATION

OF

J. M. HOSPITALITY & COMFORT LLC

A Florida LLC

6 SEP 21 PM 2: 56
LCRETARY OF STATE
ALLAHAS SEE, FLORID

ARTICLE I

NAME. The name and location of the Company shall be:

J. M. HOSPITALITY & CONFORT LLC 5401 S. KIRKMAN RD STE 135 ORLANDO, FL 32819

ARTICLE II

PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS. The location of the principal place of business of the Company shall be:

5401 S. KIRKMAN RD STE 135 ORLANDO, FL 32819

ARTICLE III

REGISTERED AGENT. The name and location of the registered agent of the Company shall be:

US TAX CONSULTING INC 5401 S KIRKMAN RD STE 135 ORLANDO, FL 32819

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.

Signature Agent Registered Danilo Santana

ARTICLE IV

BUSINESS PURPOSE. The purpose of the Company will engage in any and all lawful business under the law of the United States of America and the State of Florida.

ARTICLE Y

LISTING OF AUTHORIZED MEMBERS

Signed and Agreed this 13rd day of September, 2016.

Reginaldo Ferreira

AMBR

Rua US Open 90

Londrina, PR 86058-138 BR

Izilda Jocelaine Catandubas Ferreira

AMBR

Rua US Open 90

Londrina, PR 86058-138 BR

Authorized by Member(s) to provide Member Listing as of 13rd day of September, 2016.

Reginaldo Ferreira

Izilda Jocelaine Catandubas Ferreira

ARTICLES YI

CAPITAL CONTRIBUTIONS

Pursuant to ARTICLE 2, the Members' initial contribution to the Company capital is stated to be \$1,000.00. The description and each individual portion of this initial contribution are as follows:

NAME	CAPITAL	PERCENT
Reginaklo Ferrei ra	\$500	50%
Izilda Jocelaine Catandubas Ferreira	\$500	50%

Signed and Agreed this 13rd day of September, 20/6.

Reginatio Verreira

Izilda Jocelaine Catandubas Ferreira

SEP 21 PM 2:

ACKNOWLEDGMENT

State of Florida

County of Orange

On September 13rd, 2016 before me, Danilo Santana, notary, appeared Reginaldo Ferreira and Izilda Jocelaine Catandubas Ferreira personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Witness my hand and official seal.

Signature

Notary - Danilo Santona



SECRETARY OF STATE

SECRETARY OF STATE

AND SHARE FROMING