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Florida Department of State  
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From:  
Account Name : SALOMON B. ESQUENAZI, P.A.  
Account Number : I20130000020  
Phone : (954)989-4995  
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17 SEP 19 PM 4:55  
DIVISION OF CORPORATIONS  
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FLORIDA LIMITED LIABILITY CO.  
BRI-MA 1010A LLC

Certificate of Status	1
Certified Copy	1
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DIVISION OF STATE  
TALLAHASSEE FLORIDA

Audit No.: H17000246499 3

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

**ARTICLE I. Name**

The name of the Limited Liability Company is:

**BRI-MA 1010A LLC**

**ARTICLE II. – Address**

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

150 SE 2<sup>nd</sup> Avenue  
Suite 1025  
Miami, FL 33131

**ARTICLE III. – Registered Agent, Registered Office, & Registered Agent’s Signature:**

The name and the Florida street address of the registered agent are:

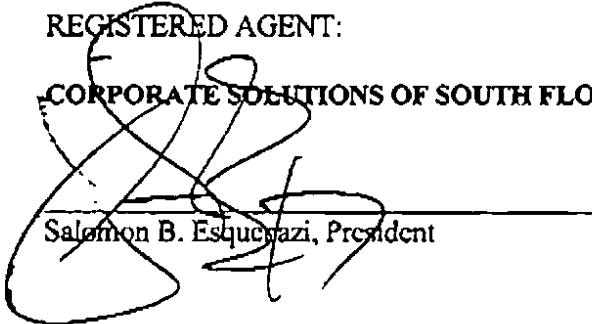
**Corporate Solutions of South Florida, Inc**  
4651 Sheridan Street, Suite 355  
Hollywood, FL 33021

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SEC. OF STATE  
TALLAHASSEE, FLORIDA

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, we hereby accept the appointment as registered agent and agree to act in this capacity. We further agree to comply with the provisions of all statutes relating to the proper and complete performance of our duties, and we are familiar with and accept the obligations of our position as registered agent as provided for in Chapter 605, Florida Statutes.

REGISTERED AGENT:

**CORPORATE SOLUTIONS OF SOUTH FLORIDA, INC.**



Salomon B. Esquenazi, President

Audit No: H17000246499 3  
This instrument was prepared by:  
Salomon B. Esquenazi, Esq.  
Salomon B. Esquenazi, P.A.  
4651 Sheridan Street, Suite 355  
Hollywood, FL 33021  
(954) 989-4995

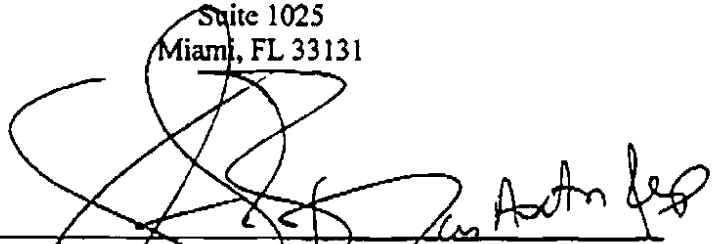
Audit No. H17000246499 3

**ARTICLE IV. – Management:**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The names and addresses of the managers who are to serve as initial managers are:

**Maura Cevallos de Padron**  
150 SE 2<sup>nd</sup> Avenue  
Suite 1025  
Miami, FL 33131

**Salvador Padron**  
150 SE 2<sup>nd</sup> Avenue  
Suite 1025  
Miami, FL 33131



Signature of a member or authorized representative of a member.

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.

4848-1916-1168, v. 1

Audit No.: H17000246499 3  
This instrument was prepared by:  
Salomón B. Esquenazi, Esq.  
Salomon B. Esquenazi, P.A.  
4651 Sheridan Street, Suite 355  
Hollywood, FL 33021  
(954) 989-4995

STATE DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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