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FLORIDA LIMITED LIABILITY CO.

Champion Land LLC

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J. FASON

APR 29 2020

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Champion	· · · · · · · · · · · · · · · · · · ·	·····
(Must end with the words "Limi	ited Liability Company, "L.L.C.," or	"LLC.")
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Com	ipany is:
Principal Office Address: M	alling Address:	
1008 Bel Air Dr	1008 Bel Air Dr	
Highland Beach, FL 33487	Highland Beach, FL 33	487
The name and the Florida street address of the register		
Massimo DeBello	ame	
•	pite	
1008 Bel Air Dr Florida street address (P.O.	Box NOT accentable)	
	22407	
Highland Beach City	FL 33487 Zip	
Having been named as registered agent and to accept the place designated in this certificate, I hereby accapacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the	ecept the appointment as registered ag ons of all statutes relating to the prope	ent and agree to act in this er and complete performance
maun o	Dardy	
Registered Agent's S	ignature (REQUIRED)	
	Depend	20:
Massimo [
	INUED)	2020 APR

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pg 4 of 4

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Giancarlo DeBello
	1008 Bel Air Dr Highland Beach, FL 33487
AMBR	Massimo DeBello 1008 Bel Air Dr Highland Beach, FL 33487
AMBR	Troy Samek 10620 Plainview Cr Boca Raton, FL 33498
AMBR	Omar Abu Iqab 17832 Wagonwheel Dr Boca Raton, FL 33496
(Use attachment if necessary)	
	date of filing: (OPTIONAL) ne specific and cannot be more than five business days prior to or 90
elective date is fisted, the date must be of filling.) LE VI: Other provisions, if any.	
of filing.) LE VI: Other provisions, if any.	
of filing.)	Dandy
REQUIRED SIGNATURE: Signature of (In accordance with seconstitutes an affirmat I am aware that any fa	a member or an authorized representative of a member. Stion 605.0203 (1) (b), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true. Ise information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.)
REQUIRED SIGNATURE: Signature of (In accordance with seconstitutes an affirmat I am aware that any fa	tion 605.0203 (1) (b), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true, lse information submitted in a document to the Department of State