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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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## FLORIDA LIMITED LIABILITY CO. 1125 INVESTMENT LLC

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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:  |                        |                 |             |             |
|--|------------------------|-----------------|-------------|-------------|
| The name of the Limited Liability Company is:  |                        |                 |             |             |
| 1125 Investment LLC  | <i>.</i> .             |                 |             |             |
| ARTICLE II - Address: The mailing address and street address of the principal Company is:  |                        | ed Liabili      | ty          |             |
| 745 Coronado Avenue  |                        |                 |             |             |
| Miami Fl. 33143  |                        |                 |             | <del></del> |
|  |                        |                 |             | <del></del> |
| ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the register Company cannot serve as its own Registered Agent. You must designate an individual an active Florida registration.) | ed agent are: (The Lin | nited Liability | ·           |             |
| Sonia Da Corte   |                        |                 |             |             |
| 745 Coronado Avenue  |                        |                 |             | <del></del> |
| Miami, Fl. 33143   |                        | <del></del>     |             |             |
| ARTICLE IV The name and title of each person authorized to manag Liability Company: (MGR or AMBR)  | ge and control the Li  | united          |             | · TACLE     |
| Sonia Da Corte   | (AMBR)                 |                 |             |             |
| GEURGE FERREIRA CESAR  | (AMBR)                 | =;              | 2022        | <del></del> |
|  | •                      | 10 To           | 1 43        |             |
|  | *****                  |                 | <del></del> |             |
|  | <del></del>            | <del></del>     | <u>6</u> .  |             |

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## Required Signatures:



In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an 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.

Sonia Da Corte
Typed or printed name of signee

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..

Registered Agent's Signature (REQUIRED)

11 1.