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Florida Department of State
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FLORIDA LIMITED LIABILITY CO.
PRIZM ACTIVE, LLC.

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF**

PRIZM ACTIVE, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

PRIZM ACTIVE, LLC.

ARTICLE II -- ADDRESS

The principal office of the Limited Liability Company is:

**260 SUNRISE DR UNIT H
KEY BISCAYNE, FL. 33149**

The mailing address shall be:

**260 SUNRISE DR UNIT H
KEY BISCAYNE, FL. 33149**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

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

ALESSANDRO DE MARZO

260 SUNRISE DR UNIT H
Florida Street address (P.O.BOX NOT acceptable)
KEY BISCAYNE, FL. 33149
City, State, and Zip

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..

Alessandro de Marzo
REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ALESSANDRO, DE MARZO
260 SUNRISE DR UNIT H
KEY BISCAYNE, FL. 33149

AMBR

LUIGGI, DE MARZO
260 SUNRISE DR UNIT H
KEY BISCAYNE, FL. 33149

MANAGER

LOPE, CARVAL
260 SUNRISE DR UNIT H
KEY BISCAYNE, FL. 33149

MANAGER

Alessandro de Marzo
Signature of a member or an authorized representative of a member.
(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.)

ALESSANDRO, DE MARZO
Typed or printed name of signee