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FLORIDA LIMITED LIABILITY CO. AMBASSADOR 1927 LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability	/ Company is:			
Ambassador 1927 L.L.	.C	1 illes Company is	(1 C "or"H C")	
(Must conta	in the words "Limited Lie	ability Company,	L.L.C., or Lise.	
ARTICLE II - Address: The mailing address and street ad	idress of the principal off	ice of the Limited I	Liability Company is:	
Princips	al Office Address:		Mailing Address:	
7382 NW 112 Ct			NW 112 Ct	
Miami, Fl 33178		Mian	ni, Fl 33178	-
The name and the Florida street	Perez Abello Law PLI	Name		
The name and the Florida street	Perez Abello Law PLI	Name	cceptable)	
The name and the Florida street	Perez Abello Law PLI	Name uite 1309 (P.O. Box NOT as		
The name and the Florida street	Perez Abello Law PLI 1390 S. Dixie Hwy, S Florida street address	Name uite 1309 (P.O. Box NOT as	eceptable) Zip	
Having been named as registered place designated in this certificate	Perez Abello Law PLI 1390 S. Dixie Hwy, S Florida street address Coral Gables, FL 331. City agent and to accept service, I hereby accept the apportunitions of all statutes re-	Name uite 1309 (P.O. Box NOT at 46 State te of process for the sintment as register.		<i>)</i>

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
_	Antonio Mebarak
<u>MGR</u>	7382 NW 112 Ct
	7382 NW 112 Ct Miami, FL 33178
_ 	
(Use attachment if necessary) E V: Effective date, if other than the fective date is listed, the date must be	date of filing:
LE V: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does ament's effective date on the Department.	not meet the applicable statutory filing requirements, this date will not be
LE V: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does ament's effective date on the Department of the Department	not meet the applicable statutory filing requirements, this date will not be
LE V: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does ament's effective date on the Department's Other provisions, if any. REQUIRED SIGNATURE:	not meet the applicable statutory filing requirements, this date will not be ment of State's records. Coccusigned by: Autonio Meharak
EV: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does ment's effective date on the Department's effective date on the Department. EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of	not meet the applicable statutory filing requirements, this date will not be ment of State's records.
JEV: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does ament's effective date on the Department's effective date on the Department's Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is earn aware that any	not meet the applicable statutory filing requirements, this date will not be ment of State's records. Docusigned by: Automio Muharak Autom
JEV: Effective date, if other than the fective date is listed, the date must be of filing.) If the date inserted in this block does ament's effective date on the Department's effective date on the Department's Other provisions, if any. REQUIRED SIGNATURE:	not meet the applicable statutory filing requirements, this date will not be ment of State's records. ——noccusioned by: Automio Mularak f a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes, by false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.