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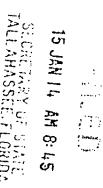
(Re	questor's Name)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: <u>bamigi investments, L.L.C.</u> Name of Li	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	ŕ
Please	return all correspondence concerning this n	natter to the following:	
	João Pedro Volz	Name of Person	
	SJ Law Group LLC.		
		Firm/Company	
	150 SE 2nd Ave. unit 505	Address	
	Miami FL, 33131	City/State and Zip Code	
įv	olzlaw@gmail.com E-mail address: (to be use	ed for future annual report notifica	ation)
For fur	ther information concerning this matter, ple	ase call:	
João	Pedro Volz at (Name of Person	305) 9722672 Area Code Daytime Te	lephone Number
Enclos	ed is a check for the following amount:		
□ \$125.0	0 Filing Fee \$\Bigsiz \$\mathbb{1}\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Add Registration Section Division of Corporat Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
bamigi investments, L.L.C. (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
150 SE 2nd Ave. unit 505 Miami FL, 33131	150 SE 2nd Ave. unit 505
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered a	gent are:
João Pedro Volz	
Name	
150 SE 2nd Ave. unit 505 Florida street address (P.O. Box I	NOT acceptable)
Miami	FL 33131
City	Zip
the place designated in this certificate. I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	tice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r.605. F.S
Registered Agent's Signature	pe (REQUIRED)
(CONTINUE	D) ASSEE
Page 1 of 2	ELCRION 15

<u> Fitle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Bárbara Minuzzi
	6801 Collins Ave.
	Miami Beach FL, 33141
AMBR	Prodige Capital L.L.C.
	10185 Collins Ave. Penthause 19
	bal harbor FL, 33154
AMBR	Renato Giraldi
	10185 Collins Ave. Penthause 19
	bal harbor FL, 33154
Hoo attachmant (Concession)	
Use attachment if necessary) EV: Effective date, if other than the ctive date is listed, the date must f filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 d
E V: Effective date, if other than the ctive date is listed, the date must filing.) E VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 d
EV: Effective date, if other than the ctive date is listed, the date must f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of	Lowa Miney a member or an audiorized representative of a member.
EV: Effective date, if other than the ctive date is listed, the date must f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with secti	a member or an authorized representative of a member.
E V: Effective date, if other than the ctive date is listed, the date must filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with section constitutes an affirmation)	a member or an authorized representative of a member. on 605.0203 (1) (b). Florida Statutes, the execution of this document under the penalties of periury that the facts stated herein are true.
EV: Effective date, if other than the ctive date is listed, the date must filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with sectic constitutes an affirmation I am aware that any false	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true.
EV: Effective date, if other than the ctive date is listed, the date must filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with sectic constitutes an affirmation I am aware that any false constitutes a third degree	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State- felony as provided for in s.817.155, F.S.)
EV: Effective date, if other than the ctive date is listed, the date must filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with sectic constitutes an affirmation I am aware that any false constitutes a third degree	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State- felony as provided for in s.817.155, F.S.)
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EV: Effective date, if other than the ctive date is listed, the date must filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with sectic constitutes an affirmation I am aware that any false constitutes a third degree	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State- felony as provided for in s.817.155, F.S.)

ARTICLE IV-