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STUDENT PHONE S WEDIE STOHL & ASSOCIATES	-	2882 MAR 15 PM 3:42 DIVILION OF CORPORATIONS TALLAHASSEE, FLORIDA			
	0 pp. Floor/Suite/Rocin , 33138	SSEE, FLORIDA			
		Office Use Only			
CORPORATION NAME(S) & DOC	CUMENT NUMBER(S),	(if known):			
1(Corporation Name)	(Document #)				
2(Corporation Name)	(Document #)				
3(Corporation Name) 4	(Document #)	8000051109884 -03/15/0201050017 ****160.00 ****160.00			
(Corporation Name) Walk in Pick up time Mail out Will wait	(Document #) Photocopy	☐ Certified Copy ☐ Certificate of Status			
NEW FILINGS	<u>AMENDMENTS</u>	-			
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of Change of Res Dissolution/W Merger				
OTHER FILINGS	REGISTRATION	N/QUALIFICATION			
Annual Report Fictitious Name	Foreign Limited Partner Reinstatement Trademark Other				
		Examiner's Initials			

J. BRYAN MAR 2 1 2002

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:

ESTELLA FINANCIAN, LLC

The mailing address and street address of the principal office of the Limited Liability Company is:

SII NE 94th STREET MIAMISHONES HL 33138

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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STUANT COOPER_Name

511 NE 94th Street
Florida street address (P.O. Box NOT acceptable)

MINMI Shones FL 33138
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 608, F.S.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MICHAEL MAHNKE
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)