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OFFICE USE ONLY (DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Document #) (Document #) Walk in Pick up time 2.00 Certified Copy Mail out Will wait Photocopy Certificate of Status **AMENDMENTS** NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership

> Reinstatement Trademark

Other

Name Reservation

Examiner's Initials

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
6254 GROUP LLC
ARTICLE II - Address:
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:
7237 100. 37 70.
Migni, PL 33142
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature
The name and the Florida street address of the registered agent are:
DIEGO EFFIO
DIEGO EFFIO 4237 NW 37AV
Florida street address (P.O. Box NOT acceptable)  Florida street address (P.O. Box NOT acceptable)  FL 33/42
City, State, and Zip
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.
DIEGO EFFIO PRESIDENT
PAULINA VALDIVIESO VICE-PRESIDENT
(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.)
DIEGO CFFID
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)