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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

1404 la perla, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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STATE OF FLORIDA
TALLAHASSEE

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ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1404 La Perla, LLC

Article II - Address:

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

1920 E. Hallandale Beach Blvd., Suite 510
Hallandale Beach, FL 33009

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

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

Boris Kromas
Name

1920 E. Hallandale Bch Blvd. Ste 510
Florida street address (P.O. Box NOT acceptable)

Hallandale Bch, FL 33009
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..

Boris Kromas
Registered Agent's Signature

ARTICLE IV - Management / Members

The name(s) and address(es):

Boris Kromas Mgmt / Memb.
1920 E. Hallandale Bch Blvd, Ste #510
Hallandale Beach, FL 33009

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ARTICLE V - 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)

[Handwritten Signature]

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.)

Boris Kromas

Typed or printed name of signer

APPROVED
AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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