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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : LUIS F. TRUJILLO

Account Number : 120040000090 Phone

: (305)321-0442 Fax Number : (305)858-5204

LIMITED LIABILITY COMPANY

PILICLEM, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name:

The name of the Limited Liability Company is: PILICLEM, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 2251 S.W. 27TH. STREET SUITE #3 MIAMI, FLORIDA 33133

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

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

CLEM	ENTE MARTINEZ
	Name
2251 S.W. 27	TH. STREET SUITE #3
Florida street addres	ss (P.O. Box NOT acceptable)
MIAMI,	FLORIDA 33133
City.	State, and Zip
Having been named as registered agent and to accept liability company at the place designated in this certij	
registered agent and agree to act in this capacity. I fu statutes relating to the proper and complete performa	urther agree to comply with the provisions of all
accept the obligations of my position as registered ag	
S. A.	(her)

Registered Agent's Signature

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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.)

MARIA DEL PILAR BLANCO

Typed or printed name of signee

MARIA DEL PILAR BLANCO - Manager / Member 2251 S. W. 27TH. STREET SUITE #3 MIAMI, FLORIDA 33133

S-CATAGER FLORIDA