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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 : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

ACE QUEST, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

JUN 14 2014

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is: Ace Quest, L.L.C.

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 6365 Collins Avenue, #1509, Miami Beach, Fl 33141.

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature: Lydia Acevedo

The name and the Florida street address of the registered agent are: 6365 Collins Avenue, #1509, Miami Beach, Fl 33141.

Name
Lydia Acevedo

Florida Street address (P.O. Box **NOT** acceptable)
6365 Collins Avenue, #1509

City, State and ZIP
Miami Beach, Fl 33141

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

1536 4/18/50

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.)

Lydia Acevedo
Typed or printed name of signee

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.)