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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 : BERRIZ & GIRALDO P.A.
Account Number : I19990000017
Phone : (305)485-9300
Fax Number : (305)485-1098

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DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

ACUNA STONE, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OF

ACUNA STONE, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

ACUNA STONE, LLC.

ARTICLE II - ADDRESS

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

**7845 ABBOTT AVE # 9
MIAMI BEACH, FL 33141**

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

WILSON ACUNA

7845 ABBOTT AVE # 9

Florida street address (P.O.BOX NOT acceptable)

MIAMI BEACH, FL 33141

City, State, and Zip

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**BERRIZ & GIRALDO P.A.
4080 SW 84 AVE SUITE C
MIAMI, FL 33155
(305) 488-9300**

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405 000 155 9983.

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

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

WILSON ACUNA
7845 ABBOTT AVE # 9
MIAMI BEACH, FL 33141

MANAGER

CATTERINE ESPOSITO
7845 ABBOTT AVE # 9
MIAMI BEACH, FL 33141

MANAGER

(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.)

WILSON ACUNA
Typed or printed name of signee

405 000 155 9983.

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