

Florida Department of State

Division of Corporations

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To:

Division of Corporations
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From:

Account Name : EMPIRE CORPORATE KIT COMPANY
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

rexson, llc

[Handwritten Signature]

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

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF
REXXON, LLC.**

ARTICLE I Name:

The name of the Limited Liability Company is:

REXXON, LLC.

ARTICLE II Address:

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

**18100 N. Bay Rd. # 1109
Sunny Isles Beach, FL 33160**

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida Street Address of the registered agent are:

Leonardo A. Roth, Esq.
Roth, Rousso, Katsman & Schneider, LLP.
18851 NE 29th Avenue, Ste 900
Aventura, FL 33180

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:(Check box if applicable)

x The Limited Liability Company is to be managed by the managers and the name and address of the managers are:

1. Jorge Raul Pack: 18100 N. Bay Rd. # 1109, Sunny Isles Beach, FL 33160



Signature

(In accordance with section 608.402 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

Jorge Raul Pack
Typed or printed name of signee

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