

L05000086072

Division of Corporations

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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 : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I200000C0146
Phone : (305)444-4994
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LIMITED LIABILITY COMPANY
SMART INVESTMENTS & SERVICES, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

SMART INVESTMENTS & SERVICES, LLC.

ARTICLE II - Address:

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

Principal Office Address:

2236 SW 21st TERRACE

MIAMI, FL 33145

Mailing Address:

2236 SW 21st TERRACE

MIAMI, FL 33145

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

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

FLORELSA MONTANE

Name

2236 SW 21st TERRACE

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

MIAMI

FLORIDA 33145

City, State, and Zip

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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, Florida Statutes.



Registered Agent's Signature

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ARTICLE IV - Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MANAGER

FLORELSA MONTANE
2236 SW 21st TERRACE
MIAMI, FL 33145

MANAGER

VITELIO SILVA
2236 SW 21st TERRACE
MIAMI, FL 33145

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED 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.)

FLORELSA MONTANE

Typed or printed name of signer

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