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OF PRICES PRICES Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Document #) (Document #) (Corporation Name) (Document #) (Corporation Name) Walk in \triangle Pick up time 2.00Certified Copy Photocopy Will wait Certificate of Status Mail out **NEW FILINGS AMENDMENTS** Profit Amendment Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATION **OTHER FILINGS** Annual Report Foreign ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: BOYI LLC The name of the Limited Liability Company is:
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
2700 GLADE CIRCLE SUITE 137, WESTON FI 3332
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
EDUARDO BOZO
Name
2700 GLADE CIPCLE SUITE 137
Florida street address (P.O. Box NOT acceptable) UESTON FL 33327
City, State, and Zip
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 it Chapter 608, F.S
Lower fil
Registered Agent's Signature
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.
EDUARDO BOZO - MANAGING MEMBER
LOUARDO BOZO - MANAGING MEMBER JORGE YILD - MANAGING MEMBER
(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.)
EDIARD BOZO Typed or printed name of signee
FILING FEES: \$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL)

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2700 GLADE CIRCLE SUITE 137, WESTON FI 3332
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatures
The name and the Florida street address of the registered agent are:
EDUARDO BOZO Name Pago Compagnio C
Florida street address (P.O. Box NOT acceptable) UE STON FL 33327 City, State, and Zip
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.)
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