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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

FLORIDA/FOREIGN LIMITED LIABILITY CO.

I WILL DO IT, LLC.

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

RECEIVED
06 APR 24 PM 1:25
DIVISION OF CORPORATION

FILED
06 APR 24 AM 9:23
TALLAHASSEE FLORIDA

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Corporate Filing Menu

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W. HODGES

106 0001099293.

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF**

I WILL DO IT, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

I WILL DO IT, LLC.

ARTICLE II - ADDRESS

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

**13008 SW 91 PL
MIAMI, FL. 33176**

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

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

ANDRES MORA

13008 SW 91 PL

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

MIAMI, FL 33176

City, State, and Zip

**BERRIZ & GIRALDO P.A.
4080 SW 84 AVE SUITE C
MIAMI, FL 33155
(305) 485-9300**

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406 000 109 9293 .

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

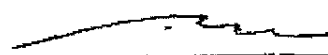
ARTICLE IV- MANAGEMENT

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

ANDRES MORA
2112 SW 17 AVE
MIAMI, FL 33145

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 808.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ANDRES MORA

Typed or printed name of signee

406 000 109 9293 .