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Florida Department of State  
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*Brito*

To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

### COLOMBOSTILE FLORIDA LLC

Certificate of Status	0
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J. BRYAN MAY 18 2006

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Colombostile Florida LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: 16711 Collins Ave #2504 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:

Name  
Marcel Boss

Florida Street address (P.O. Box **NOT** acceptable)  
16711 Collins Ave #2504

City, State and ZIP  
Sunny Isles Beach FL, 33160

*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

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**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.

(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.)

\_\_\_\_\_  
Typed or printed name of signee  
Marcel Boss

\_\_\_\_\_  
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.)

\_\_\_\_\_  
Typed or printed name of signee

\_\_\_\_\_  
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.)

\_\_\_\_\_  
Typed or printed name of signee

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