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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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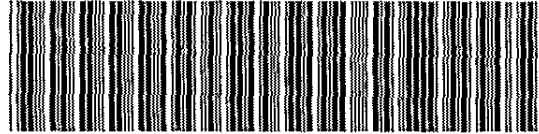
(Business Entity Name)

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TALLAHASSEE FLORIDA

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[Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPQR2 MANAGEMENT, LLC.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICARDO DE LEO

(Name of Person)

SADDELCO, INC.

(Firm/Company)

1681 N.W. 97TH AVENUE

(Address)

DORAL, FL. 33172

(City/State and Zip Code)

For further information concerning this matter, please call:

RICARDO DE LEO

(Name of Person)

at (305) 431 4544

(Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) CR. 1256

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

SPQR MANAGEMENT, LLC.

ARTICLE II – Address:

Principal Office Address:
1681 N.W. 97th Avenue
Doral, Florida 33172

Mailing Address:
1681 N.W. 97th Avenue
Doral, Florida 33172

ARTICLE III – Registered Agent:

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

Ricardo De Leo
1681 N.W. 97th Avenue, Doral, Florida 33172

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.

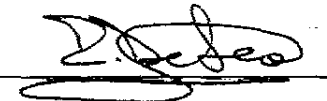

Registered Agent's Signature

ARTICLE IV – Managing Members:

The name and address of each managing Member is as follows:

MGRM	Sante De Leo	1681 N.W. 97 th Avenue, Doral, Fl. 33172
MGRM	Gina De Leo	1681 N.W. 97 th Avenue, Doral, Fl. 33172
MGRM	Roberto De Leo	1681 N.W. 97 th Avenue, Doral, Fl. 33172
MGRM	Ricardo De Leo	1681 N.W. 97 th Avenue, Doral, Fl. 33172

SIGNATURE:



(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.)

RICARDO DE LEO
Name of signee

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