

Florida Department of State

Division of Corporations Public Access System

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: EXPRESS CORPORATE FILING SERVICE INC.

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ORIDA/FOREIGN LIMITED LIABILITY CO.

ZENA CONSULTING, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -

Name: The name of the Limited Liability Company is:

ZENA CONSULTING, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1913 SOUTH OCEAN DR STE 334 HALLANDALE, FL 33009 1913 SOUTH OCEAN DR.STE 334 HALLANDALE, FL 33009

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own-Registered Agent You must designed an Individual or another business entity with an active Florida registration.)

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

ROMINA BELEN GARCIA VARANO Name

1913 SOUTH OCEAN DR STE 334
Florida street address (P.O. Box NOT acceptable)

FL 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 postition as registered agent as provided for in Chapter 608, F.S

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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:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

ROMINA BELEN GARCIA VARANO 1913 SOUTH OCEAN DR STE 334 HALLANDALE, FL 33009

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing:--------------- (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED: SIGNATURE

Signature of a manifel drain authorized representative of a manifer.

(In accordance with section 608.408(3), Plorida Statutes, the execution of this document constitutes affirmation under the penalties of perjury that the facts stated herein are true.)

ROMINA BELEN GARCIA VARANO
Typed or printed name of signee

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