

LD 1000010544

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

From:
Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

LS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Nissi Investments LLC

Certificate of Status	0
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H07000152190 3

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

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:
NISSI INVESTMENTS, LLC

ARTICLE II ADDRESS

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

2460 CORAL WAY
MIAMI FL, 33145

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

PATRICIA GOMES
271 SHORE DR E
MIAMI, FL 33133

Having been named as registered agent 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..


PATRICIA GOMES / Registered Agent's Signature

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H07000152190 3

H07000152190 3

PAGE 2 NISSI INVESTMENTS, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

ROBERTO GOMES

2460 CORAL WAY

MIAMI FL, 33145

MANAGING MEMBER:

PEDRO JAVIER GARAVITO

2460 CORAL WAY

MIAMI FL, 33145

MANAGING MEMBER:

PATRICIA GOMES

2460 CORAL WAY

MIAMI FL, 33145

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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.

PATRICIA GOMES

Typed or printed name of signee

H07000152190 3