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ro:

Division of Corporations

Fax Number : (850)617-6383

From:

: GEOFFREY M. WAYNE, P.A. Account Name

Account Number: 076770003401 : (305)381-8108 Phone Fax Number : (305)381~8109

ORIDA/FOREIGN LIMITED LIABILITY CO.

Trionfi LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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HORROLLARS OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: TRIONFI LLC

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 2665 South Bayshore Drive, Suite 1110, Coconut Grove, Florida 33133

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Geoffrey M. Wayne, Esq. Colonnade Plaza, Suite 220 1201 Brickell Avenue Miami, Florida 33131-3207

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.

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.

Registered Agent's Signature

ARTICLE V - That the Sole Member, President and Secretary of the Company is:

Isabel Osio - President Isabel Osio - Secretary

(An additional article must be added if an effective date is requested)

ature 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.)

> Geoffrey M. Wayne Typed or printed name of signee

FILING FEES: \$ 100.00 Filling Fee for Articles of Organization 25.00 Designation of Registered Agent 30.00 Certified Copy (OPTIONAL)

5.00 Certificate of Status (OPTIONAL)

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