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| (R | equestor's Name) | |
|-------------------------|------------------------|------------|
| (A | ddress) | |
| (Ad | ddress) | |
| (Cı | ity/State/Zip/Phone #) | - 1-11-11- |
| PICK-UP | ☐ WAIT | MAIL |
| (Bı | usiness Entity Name) | |
| (Di | ocument Number) | |
| Certified Copies | Certificates of | Status |
| Special Instructions to | Filing Officer: | |
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ALLAHASSE PARE

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CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

| and the second s | Office Use (| Only |
|--|---|-----------------------------------|
| CORPORATION NAME(S) & DOCUMI | ENT NUMBER(S), (if known): | |
| 1. EDGAR AC (Corporation Name) | E GALLER (Document #) | Y E CELL |
| 2. (Corporation Name) | (Document #) | 1001.15 |
| 3. (Corporation Name) | (Document #) | |
| 4. (Corporation Name) | (Document #) | |
| Walk in Pick up time | | tified Copy tificate of Status |
| NEW FILINGS Profit Not for Profit Limited Liability Domestication Other | AMENDMENTS Amendment Resignation of R.A., Office Change of Registered Ager Dissolution/Withdrawal Merger | |
| OTHER FILINGS | REGISTRATION/QUALIFIC | CATION |
| Annual Report Fictitious Name | Foreign Limited Partnership Reinstatement Trademark Other | |
| GD D D D D D D D D D D D D D D D D D D | Exar | niner's Initials |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | |
|--|--|
| EDGAR ACE GALLERY, LLC | |
| (Must end with the words "Limited Liabil | ity Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the property o | rincipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 7520 NE 4TH COURT MIAMI, FL 33138 | 770 NE 69TH STREET #6A MIAMI, FL 33138 |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) | |
| The name and the Florida street address of the | registered agent are: |
| EDGAR ACE | 草 电 五 |
| Name | |
| 770 NE 69TH STRE | ET#6A BR B D |
| Florida street add | dress (P.O. Box NOT acceptable) |
| MIAMI, FL 33138 | FL Self Self Self Self Self Self Self Self |
| City, State, | and Zip |
| | accept service of process for the above stated limited his certificate, I hereby accept the appointment as |

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 (REQUIRED

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| Title: "MGR" = Manager | Name and Address: |
|---------------------------------------|---|
| "MGRM" = Managing Member | |
| MGRM | EDGAR ACE |
| | 770 NE 69TH STREET #6A |
| | MIAMI, FL 33138 |
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| (Use attachment if necessary) | |
| TEV. Effective data if other than | the date of filing: (OPTION) |
| ffective date is listed, the date mus | the date of filing: (OPTIONA t be specific and cannot be more than five business day |
| days after the date of filing.) | |
| | N |
| REQUIRED SIGNATURE: | |
| | |
| | |
| Signature of a men | nber or an authorized representative of a member. |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

EDGAR ACE

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee