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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDAFLORIDA LIMITED LIABILITY CO.
AC ARCHITECTURE LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION

OF

AC ARCHITECTURE LLC

ARTICLE I - NAME

The name of the Limited Liability Company is AC ARCHITECTURE LLC

ARTICLE II - DURATION

The period of duration of the Company shall be perpetual.

ARTICLE III - ADDRESS

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

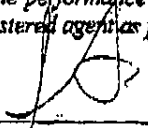
1235 CORAL WAY, SUITE 103
MIAMI FL 33145

ARTICLE IV - REGISTERED AGENT & OFFICE

The name and address of the registered agent for this Limited Liability Company, within the State of Florida is:

ALEXIS COGUL LLEONART
1235 CORAL WAY, SUITE 103
MIAMI FL 33145

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 obligation of my position as registered agent as provided for in Chapter 608, F.S.



Registered Agent's Signature

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ARTICLE V - MEMBER(S)

The Limited Liability Company shall have 1 member whose name and address is:

ALEXIS COGUL LEONART

1235 CORAL WAY, SUITE 103
MIAMI FL 33145

ARTICLE VI - MANAGEMENT

- ☐ The management of the Company is reserved to the managers of the company. The name and address of the manager or managing member is as follows:

ALEXIS COGUL LEONART
1235 CORAL WAY, SUITE 103
MIAMI FL 33145



Signature of 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.)

ALEXIS COGUL LEONART

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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