

08/28/2031 05:30

#001 P.001/003

**L13000145980**

Florida Department of State  
Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
CREDIT SHANTALL, LLC**

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T. HAMPTON

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I – Name:** The name of the Limited Liability Company is:**Credit Shantall, LLC****ARTICLE II – Address:**

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

**Principal Office Address:**9940 NW 88 TE  
Doral, FL 33178.**Mailing Address:**9940 NW 88 TE  
Doral, FL 33178**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:**

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

**Jose Luis Cortesi**11251 NW 20<sup>th</sup> Street, Suite 119  
Miami, FL 33172

*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.*

**Jose Luis Cortesi**  
Registered Agent's Signature(CONTINUED)  
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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:

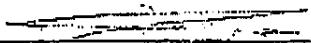
**Title:**

**Name and Address:**

MGRM

JOSEPH ABDON

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
**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.)

**JOSEPH ABDON**

\_\_\_\_\_  
**Typed or printed name of signee**

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