L1500.	0048560
(Requestor's Name) (Address) (Address)	200269834012
(City/State/Zip/Phone #)	03/18/1501002014 **155.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	DEPARTMENT OF STAT
Special Instructions to Filing Officer: Office Use Only	15 HAR 18 PH 4: 57 STURE DART OF STATE TALLAHASSIE, FLORIDA

5000 MAR 1 9 2019

!

I



# **CT Corporation System**

# 515 E Park Avenue, Tallahassee, FL, 32301

## 850-205-8842

# FACE TORTUGA LLC

() Nonprofit ()Domestic Corporation () Limited Partnership (X) LLC

Formation

(X) Certified Copy Formation

(x) Walk In () Mail Out

Name Availability \_\_\_\_\_ Document Examiner Updater \_\_\_\_\_ Verifier \_

W.P. Verifier

(X) Amendment () Merger () Dissolution/Withdrawal () Mark () Reinstatement () Annual Report (X) Other () Name Registration (X) Fictitious Name (X) CUS (X) Photocopies () After 4:30 () Will Wait (x) Pick Up 3/18/2015 Order# 9482260 KM Ref#: Amount: \$

## COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: FACE TORTUGALLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Paulo Miranda Name of Person		
	Hand Of PERSON		
ļ			
	PSM Corporate Services, Inc.	<u> </u>	$\vec{\sigma}$
	Firm/Company		-
		<u>≥</u> ,;;	HAR
		SP.	20
	1001 Brickell Bay Drive Suite 2406	<u></u>	3
	Address	 <	
1		17 C	РН
1			
	Miami, Florida 33131		
	City/State and Zip Code	UNIT:	J.
	- <b>P</b>	A IV, G	
	valeria.espinoza@psmcorporate.com address: (to be used for future annual report notification)		

For further information concerning this matter, please call:

 Valeria L. Espinoza
 at ( 305 )
 456-3752

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

Si25.00 Filing Fee

Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee FL 32314

SIβ0.00 Filing Fee &

Certificate of Status

Street/Courier\_Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:

FACE TORTUGA LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

c/o Paulo Miranda		Same as principai
1001 Brickell Bay Driv	e. Suite 2406	
Miaml, FL 33131		

ARTICLE 111 - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ida s	treet address of the registered a	igent are:		ភ្	an spart
	NRAI Services	Inc		MAR	
	Name		S.		tron dia
	1200 South Pine Islan	nd Read		3	Seemaar
FI	prida street address (P.O. Box)				
	Plantation	FL. 33324		<u> </u>	Lanuari
	City	Zip	NDA A	57	"TELES"

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 copacity. 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 605, F.S.,

michele Holden

Michele Holden,

Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

••					
	ARTICLE IV- The name and address	of each person authori	ized to manage and control the Limited Liability Company:		
	<u>Title:</u>		Name and Address:		
	"AMBR" = Authorized "MGR" = Manager	Member			
	Manager	¥	Adalberto De Menezes Pedroso	•	
			1001 Brickell Bay Drive, Suite 2406 Miami, FL 33131	•	
	Manager		Maria De Fatima Carrera Castro Pedroso	_	
	-		1001 Brickell Bay Drive, Suite 2405 Miami, FL 33131	-	
				- ਹੋ	
	Member		Face Holdings Investment Corp.	H	
	······································	ł		. co	
				- P	l
	(Use attachment if necc	(100v)	LORID	÷	100
			T-6	57	
he dai	effective date is listed, the te of filing.)	date must be specific	iling: (OPTIONAL) c and cannot be more than five business days prior to or S	90 days	: afi
he dai	effective date is listed, the	date must be specific		90 days	af
he dai	effective date is listed, the te of filing.)	date must be specific		20 days	- -
he dai	effective date is listed, the te of filing.)	date must be specific if any.		90 days	: a fi
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT	date must be specific if any. URE:	c and cannot be more than five business days prior to or S	20 days	: a fi
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (In accordance constitutes ar	date must be specific if any. URE: gngture of a membre e with section 605.021 affirmation under the	c and cannot be more than five business days prior to or S error un authorized representative of a member. (03 (1) (b), Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true.	90 days	- - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (in accordance constitutes ar 1 an aware it	date must be specific if any. URE: gnoture of a member e with section 605.021 affirmation under the at any false informatio	c and cannot be more than five business days prior to or S second state of a member. (03 (1) (b), Florida Statutes, the execution of this document	90 days	- - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (in accordance constitutes ar 1 an aware it	date must be specific if any. URE: gnature of a member e with section 605.021 affirmation under the at any false information nird degree felony as	c and cannot be more than five business days prior to or S problem of a member. (03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) Valeria L. Espinoza	90 days	- - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (in accordance constitutes ar 1 an aware it	date must be specific if any. URE: gnature of a member e with section 605.021 affirmation under the at any false information nird degree felony as	c and cannot be more than five business days prior to or S er br un authorized representative of a member. (03 (1) (b). Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.)	20 days	- aA - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNA'I S (In accordance constitutes ar 1 am aware the constitutes a	date must be specific if any. URE: gnature of a member e with section 605.020 affirmation under the at any false information nird degree felony as Typ	c and cannot be more than five business days prior to or S prober of a member. 03 (1) (b). Florida Statutes, the execution of this document : penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) Valoria L. Espinoza ped or printed name of signee Filling Fees;	90 days	- aA - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (In accordance constitutes ar 1 am aware th constitutes a 5 30.00 Filing Fee for 5 30.00 Certified Co	date must be specific if any. URE: gnature of a member e with section 605.020 affirmation under the at any false information nird degree felony as Typ Articles of Organiz py (Optional)	c and cannot be more than five business days prior to or S refor an authorized representative of a member. (03 (1) (b). Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) Valeria L. Espinoza ped or printed name of signee	90 days	- - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (In accordance constitutes ar 1 am aware th constitutes a 5 125.00 Filing Fee for	date must be specific if any. URE: gnature of a member e with section 605.020 affirmation under the at any false information nird degree felony as Typ Articles of Organiz py (Optional)	c and cannot be more than five business days prior to or S prober of a member. 03 (1) (b). Florida Statutes, the execution of this document : penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) Valoria L. Espinoza ped or printed name of signee Filling Fees;	20 days	- - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (In accordance constitutes ar 1 am aware th constitutes a 5 30.00 Filing Fee for 5 30.00 Certified Co	date must be specific if any. URE: gnature of a member e with section 605.020 affirmation under the at any false information nird degree felony as Typ Articles of Organiz py (Optional)	c and cannot be more than five business days prior to or S prober of a member. 03 (1) (b). Florida Statutes, the execution of this document : penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) Valoria L. Espinoza ped or printed name of signee Filling Fees;	90 days	- aA - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (In accordance constitutes ar 1 am aware th constitutes a 5 30.00 Filing Fee for 5 30.00 Certified Co	date must be specific if any. URE: gnature of a member e with section 605.020 affirmation under the at any false information nird degree felony as Typ Articles of Organiz py (Optional)	c and cannot be more than five business days prior to or S prober of a member. (03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) Valoria L. Espinoza ped or printed name of signee <u>Filling Fees;</u> zution and Designation of Registered Agent	90 days	: aA - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (In accordance constitutes ar 1 am aware th constitutes a 5 30.00 Filing Fee for 5 30.00 Certified Co	date must be specific if any. URE: gnature of a member e with section 605.020 affirmation under the at any false information nird degree felony as Typ Articles of Organiz py (Optional)	c and cannot be more than five business days prior to or S prober of a member. (03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) Valoria L. Espinoza ped or printed name of signee <u>Filling Fees;</u> zution and Designation of Registered Agent	90 days	- aA - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (In accordance constitutes ar 1 am aware th constitutes a 5 30.00 Filing Fee for 5 30.00 Certified Co	date must be specific if any. URE: gnature of a member e with section 605.020 affirmation under the at any false information nird degree felony as Typ Articles of Organiz py (Optional)	c and cannot be more than five business days prior to or S prober of a member. (03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) Valoria L. Espinoza ped or printed name of signee <u>Filling Fees;</u> zution and Designation of Registered Agent	20 days	- - -
he dai	effective date is listed, the te of filing.) CLE VI: Other provisions, <u>REOUIRED</u> SIGNAT S (In accordance constitutes ar 1 am aware th constitutes a 5 30.00 Filing Fee for 5 30.00 Certified Co	date must be specific if any. URE: gnature of a member e with section 605.020 affirmation under the at any false information nird degree felony as Typ Articles of Organiz py (Optional)	c and cannot be more than five business days prior to or S prober of a member. (03 (1) (b), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. on submitted in a document to the Department of State provided for in s.817.155, F.S.) Valoria L. Espinoza ped or printed name of signee <u>Filling Fees;</u> zution and Designation of Registered Agent	90 days	- - -