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. (Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO:	Registration Division of C			
SUBJE	CT: USA A	Arts Group LLC		
.,	<u> </u>	Name of Lin	nited Liability Company	
The end	losed Articles	of Organization and fee(s) ar	re submitted for filing	
Please	eturn all corres	pondence concerning this m	atter to the following:	
	Jose Edis	on Henao		
			Name of Person	
			F: /C	
			Firm/Company	
	1605 Tula	ane Street	Address	
			Address	
	Ortando,		City/State and Zip Code	
JH	enao1982@y	ahoo com		
-		E-mail address: (to be use	d for future annual report notified	ation)
For fur	ther information	n concerning this matter, plea	ase call	
Jose E	dison Henao		407) 272-0317	
	Nam	e of Person	Area Code Daytime Te	lephone Number
Enclose	ed is a check fo	r the following amount:		
□ \$125.0	0 Filing Fee	☑\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section Division of Corporations PO Box 6327 Tatlahassee, FL 32314

Street/Courier Address Registration Section Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
U.S.A. Arts Group LLC	ALCONOMICA CONTRACTOR OF THE C
(Must end with the words "Limited	f Liability Company, "L.L.C.," or "LLC")
ARTICLE II - Address: The mailing address and street address of the principal c	office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
5601 Edgewater Drive Orlando, FL 32810	1605 Tulane Street Orlando, FL 32804
another husiness entity with an active Florida registration. The name and the Florida street address of the registered Jose Edison Henao Name	d agent are.
1605 Tulane Street	
Florida street address (P.O. Bo	x NOT acceptable)
Orlando	FL 32804
City	Zip
the place designated in this certificate, I hereby accepacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ob-	ervice of process for the above stated limited hability configures as pot the appointment as registered agent and agree to act actions of all statutes relating to the proper and complete performance bligations of my position as registered agent as provided for an oper 605, F.S

Page 1 of 2

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<u>litle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Jose Edison Henao
	1605 Tulane Street
	Orlando, FL 32804
	<u>O(lalido, 1 E 32004</u>
·	
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V: Effective date, if other than the date of tive date is listed, the date must be speci	filing: (OPTIONAL.) fic and cannot be more than five business days prior to or 5
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.)	filing: (OPTIONAL) fic and cannot be more than five business days prior to or 9
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ARTICLE IV-