

Florida Department of State
Division of Corporations
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To: Division of Corporations Effective Date **5/6/15**
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**FLORIDA LIMITED LIABILITY CO.
ZEFFIRO OVEST LLC**

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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I

The Name of the Limited Liability Company shall be: **ZEFFIRO OVEST LLC**

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the at.

ARTICLE III

The mailing address and street address of the principal office of the limited liability company is: 20 ISLAND AVENUE #406 MIAMI BEACH, FL 33139

ARTICLE IV

The Company shall commence business on: **MAY 6, 2015**

ARTICLE V

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

**MASSIMO MACCAGNO
20 ISLAND AVENUE #406
MIAMI BEACH, FL 33139**

ARTICLE VI

The name of the Manager(S) shall be:

**MASSIMO MACCAGNO
VIA PIANEZZA 17
10149 TORINO, ITALIA**


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FALLAHASSE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE

Zeffiro Ovest LLC

(Name of Company)

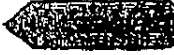
Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions 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.

(X) Massimo Macagno 

Registered Agent

MASSIMO MACCAGNO

Print Name

(X) Massimo Macagno 

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MASSIMO MACCAGNO

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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