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Division of Corporations

; (850)617-6381

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FLORIDA LIMITED LIABILITY CO. **AUM SHANTI, LLC**

Certificate of Status 0 Certified Copy J Page Count 04 Estimated Charge \$155.00

AUG - 5 2015

S, GILBERT

FLORIDA LIMITED LIABILITY COMPANY 15 AUG -4 AM 11: 19

AUM SHANTI, LLC

SECRETARY OF STATE

Article I
The name of the Limited Liability Company is:

AUM SHANTL LLC

Article II

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

Mailing Address:

c/o Shadows of the Birds, LLC 1712 Pioneer Avc., Suite 115 Cheyenne, Wyoming 82001

Street Address

c/o Shadows of the Birds, LLC 1712 Pioneer Ave., Suite 115 Cheyenne, Wyoming 82001

Article III

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State or on another effective date as specified. The company's existence shall be perpetual unless the company is dissolved earlier as provided in these articles of organization or in the regulations.

Article IV

The Limited Liability Company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The names and addresses of the managing members of the company are:

Manager(s)

Address

Shadows of the Birds, LLC

1712 Pioneer Ave., Suite 115 Cheyenne, Wyoming 82001

Article V

The Limited Liability Company is organized by the following initial member(s), whose name and address is/are as follows:

Mcmber(5)

Address

Shadows of the Birds, LLC

1712 Pioneer Ave., Suite 115 Cheyenne, Wyoming 82001

Additional members may be admitted by the unanimous written consent of all members under the terms and conditions agreed to by all of the members.

Article VI

The undersigned member or authorized representative of a member of AUM SHANTI, LLC certifies:

- the above named limited liability company has at least one member;
- 2. Each member shall make additional capital contributions to the company only on the unanimous consent of all the members:
- 3. No additional members shall be admitted to the company except by the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the company as set forth in the operating agreement of the company.
- 4. The company shall be dissolved on the death, bankruptcy, or dissolution of a member or Chief Executive Chief Executive Manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, as set forth in the operating.

(In accordance with Section 605.0203 Florida Statutes, the execution of these articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

By:

Joseph A. Spiriti, Jr.

STATE OF FLORIDA

Ss:

COUNTY OF DADE

BEFORE ME, the undersigned authority, this 3rd day of August 2015 personally appeared. Joseph A. Spiriti, Jr., to me well known to be the persons who executed the above and foregoing Articles of Organization of AUM SHANTI, LLC, and who state that he executed the same for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this ____ 3v / day of August 2015.

My Commission Expires:

POSERT L. MELLINGER
MY COMMISSION & PF 05082
EXPIRES: Saplembor 18, 2017

Notary Public

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0203 FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATED A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company:

AUM SHANTI, LLC

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

Joseph A. Spiriti, Jr. Cascrta & Spiriti 7855 NW 12th Street, Suite 202 Doral, FL 33126

Having been named 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 provision 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.

By:
Joseph A. Spiriti, Jr.

STATE OF FLORIDA

S5:

COUNTY OF DADE

BEFORE ME, the undersigned authority, this 3 who day of August 2015 personally appeared, Joseph A. Spiriti, Jr., to me well known to be the persons who executed the above and foregoing Articles of Organization of AUM SHANTI, LLC and who state that he executed the same for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this 3 day of August 2015

My Commission Expires:

