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Florida Department of State
Division of Corporations
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15 AUG 19 PM 1:38

**FLORIDA LIMITED LIABILITY CO.
FAS & AOZ HOLDING LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I- Name

The name of the Limited Liability Company is:

FAS & AOZ HOLDING LLC

ARTICLE II- Address:

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

Principal Office Address

8283 NW 64TH STREET, SUITE 8
MIAMI FLORIDA 33166

Mailing Address

8283 NW 64TH STREET, SUITE 8
MIAMI FLORIDA 33166

ARTICLES III-

Other provisions if any

ANY PURPOSE

ARTICLES IV- Register Agent, Register Office & Register Agent's Signature:)

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

FLORENCIO A SATURNO

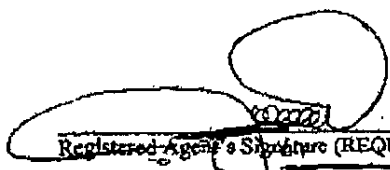
8620 NW 97TH AVENUE

APT 108

DORAL FLORIDA 33178

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 605, F.S.

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Registered Agent's Signature (REQUIRED)

ARTICLES V- Manager {s} or Managing Member [s] of each Manager or Managing Member is as follows:

Title:

FLORENCIO A SATURNO MGR' = Manager
ALEJANDRO OSORIO MGR' = Manager

Name

Address:

FLORENCIO A SATURNO

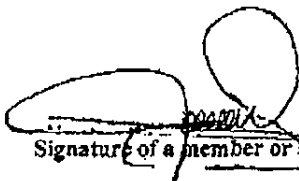
8620 NW 97TH AVENUE APT 108
MIAMI FLORIDA 33178

ALEJANDRO OSORIO

21055 YACHT CLUB DR APT 503
AVENTURE FLORIDA 33180

ARTICLE VI: effective date, if other than the date filing 08/17/15 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date filing)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member



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

FLORENCIO A SATURNO

ALEJANDRO OSORIO

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