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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: BELOFF LAW, P.A.

Account Number : 120080000060

Phone

: (305)673-1101

Fax Number

: (305)673-5505

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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FLORIDA LIMITED LIABILITY CO. PASSING GAS ON 125TH, LLC

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COVER LETTER

TO:

REGISTRATION SECTION

DIVISION OF CORPORATION

SUBJECT:

NEW FILING

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

Please return all correspondence concerning this matter to the following:

Jonathan D. Beloff, Esq. 1691 Michigan Avenue Suite 360 Miami Beach, Florida 33139 Telephone: 305-673-1101

Email Address:

sherry@belofflaw.com

\$160.00 Filing Fee Certificate Status & Certified Copy (((H150002162043)))

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PASSING GAS ON 125TH, LLC,

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

ARTICLE I- NAME:

The name of the limited liability company is: PASSING GAS ON 125TH, LLC

ARTICLE II- ADDRESS:

The address of its principal place of business, as well as the mailing address for this limited liability company is: PASSING GAS ON 125TH, LLC, a Florida limited liability company, whose address c/o Isaac Mitrani, Esq. 301 Arthur Godfrey Road, Penthouse, Miami Beach, Florida 33140

ARTICLES IIIREGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT' SIGNATURE

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

Isaac Mitrani, Esq. 301 Arthur Godfrey Road, Penthouse, Miami Beach, Florida 33140

Having been named as registered agent and to accept service of process for the above state limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to not 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.

ISAAC MARKANI, ESQ.

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ARTICLE IV

The name and address of each person authorized to manage and control the Limited Liability Company:

TITLE:

NAME AND ADDRESS:

Manager

BERNARD KLEPACH 555 NE 185 Street, Stc 201

Miami, FL 33179

ARTICLE -V -Effective Date, if other than the date of filing: N/A

ARTICLE- VI-Other provisions, if any.

REQUIRED SIGNATURE:

BERNARD KLEPACH, INCORPORATOR

Dated: September 4 , 2015

(in accordance with Section 605.0203 (1)(b). Florida Statute, the execution of this document constitutes on affirmation under the penalties of perfury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 1817.155,P.S.)