

10/14/2033 06:58

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Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
AMALFI MANAGEMENT II, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I – Name:** The name of the Limited Liability Company is:**Amalfi Management II, LLC****ARTICLE II – Address:**

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

Principal Office Address:8470 NW 30 Terrace
Doral, FL 33122**Mailing Address:**8470 NW 30 Terrace
Doral, FL 33122**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Mariana L. Topan8470 NW 30 Terrace
Doral, FL 33122

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.

DocuSigned by:

Mariana Topan

12/2/2015

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Registered Agent's Signature

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Page 1 of 2FILED
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ARTICLE IV – Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

MGR

MARIANA L. TOPAN

REQUIRED SIGNATURE:

DocuSigned by:

Mariana Topan

12/2/2015

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**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.)

Mariana L. Topan

Typed or printed name of signee

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