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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: US TAX CONSULTING INC Account Name

Account Number : I20160000060 Phone

: (407)674-8969

Fax Number

: (407)674-8970

**Enter the email address for this business entity to be used for future?

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Email Address:

FLORIDA LIMITED LIABILITY CO. LUNA LOMBARDI LLC

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ARTICLES OF ORGANIZATION

QF

LUNA LOMBARDI LLC

A Florida LLC

ARTICLE I

NAME. The name and location of the Company shall be:

LUNA LOMBARDI LLC 20335 W COUNTRY CLUB # 308 AVENTURA, FL 33180

ARTICLE II

PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS. The location of the principal place of business of the Company shall be:

20335 W COUNTRY CLUB # 308 AVENTURA, FL 33180

ARTICLE III

REGISTERED AGENT. The name and location of the registered agent of the Company shall be:

US TAX CONSULTING INC 5401 S KIRKMAN RD STE 135 ORLANDO, FL 32819

ARTICLE IV

BUSINESS PURPOSE. The purpose of the Company will engage in any and all lawful business under the law of the United States of America and the State of Florida.

ARTICLE V

LISTING OF AUTHORIZED MEMBERS

Signed and Agreed this 15th day of August, 2016.

AMDR

Rua Arquiteto Rafaelo Bertì 530 Belo Horizonte, MG 30210-120 BR

AMBR

Rua Arquiteto Rafaelo Berti 530 Belo Horizonte, MG 30210-120 BR

Authorized by Member(s) to provide Member Listing as of 15th day of August, 2016.

ARTICLES VI

CAPITAL CONTRIBUTIONS

Pursuant to ARTICLE 2, the Members' initial contribution to the Company capital is stated to be \$1,000.00. The description and each individual portion of this initial contribution are as follows:

NAME	CAPITAL	PERCENT
Luna Rios Lombardi	\$990	90%
Lis Rios Lombardi	\$10	1%

Signed and Agreed this 15* day of August, 2016.

Lung Rios Lombordi

Tie Rine Lombardi

IUG 16 AM 9:

ACKNOWLEDGMENT

State of Florida

County of Orange

On August 15°, 2016 before me, Danilo Santana, notary, appeared Luna Rios Lombardi and Lis Rios Lombardi personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Witness my hand and official seal.

Signature

Notary - Danilo Santana

DANILO P. SANTANA
Notary Public - State of Fiorida
Commission # FF 245585
Hay Comm. Expires Jun 30, 2019
Boaded through National Notary Asen.

AUG 16 AM S