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**Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
217 CALABRIA LLC**

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

OCT 12 2016
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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

217 CALABRIA LLC

ARTICLE II - Address:

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

7320 N. W 12 ST UNIT 115
MIAMI, FL 33126

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

RAFAEL JOSE CONTRERAS

7320 NW 12 ST Unit 115

Miami FL 33126

ARTICLE IV-

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

Rafael Jose Contreras
(AMBR)

SECRET
2016 OCT 11 AM 8:55

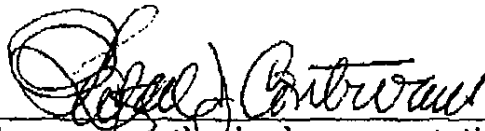
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Required Signatures:



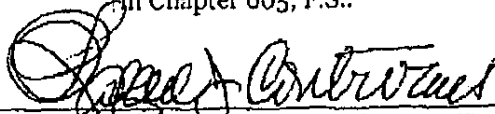
Signature of a member or an authorized representative of a member.

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. 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 s.817.155, F.S.

RAFAEL JOSE CONTRERAS

Typed or printed name of signee

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..



Registered Agent's Signature (REQUIRED)

SECRETARY OF STATE
DIVISION OF CORPORATE REGISTRATION

16 OCT 11 AM 8:55

APPROVED
AND
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