Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617+6381

From:

Account Name

: Ala REGISTERED AGENT INC.

Account Number : 120090000032 : (361)792-2236

Fax Number

: (561)252-8032

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

FLORIDA LIMITED LIABILITY CO.

RHYTHM & HARMONY REAL ESTATE DEVELOPER LL

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RHYTHM & HARMONY REAL ESTATE DEVELOPER LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2828 CORAL WAY, STE 309 MIAMI FL 33145 2828 CORAL WAY, STE 309 MIAMI FL 33145

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florica registration.)

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

A1A REGISTERED AGENT INC.

Name

5647 110TH AVENUE NORTH

Florida street address (P.O. Box NOT acceptable)

ROYAL PALM BEACH FL

City

State

Zip

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.

(CONTINUED)

Agent's Signature (REQUIRED)

Page 1 of 2

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ARTICLE IV-		ر 2017 ر	AN -4 AM
The name and address of each person auth	perized to manage and control the Limi	ted Liability.Compa	יייי און
Title:	Name and Address:	127	IASSEE. FLO
"MGR" = Manager		(>	
MGR — Manager	MARTIN ANTONIAZZI		
	2828 CORAL WAY, STE 3	00	
	MIAMI FL 33145		
NCD	N 4 D C C AN (CON) 4 771		
MGR	MARCO ANTONIAZZI		_
	2828 CCRAL WAY, STE 3	09	
	MIAMI FL 33145		
MGR	CARLOS SALAS		_
	2828 CORAL WAY, STE 3	309	
	MIAMI FL 33145		
			
			
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Page 2 of 2