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Division of Corporations

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From:

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Account Number: 120030000043 Phone : (800)342-9856

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## FLORIDA LIMITED LIABILITY CO. MELLER LLC

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MAY 1 6 2017

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MELLER LLC

(Must contain 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:

3311 NE 57 COURT FORT LAUDERDALE, FL 33308 3311 NE 57 COURT FORT LAUDERDALE, FL 33308

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 Florida registration.)

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

GERSON MELLER LEITE de OLIVEIRA

Nam

3311 NE 57 COURT

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

FORT LAUDERDALE

FL

33308

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 us registered agent as provided for in Chapter 605, F.S.

s//Gerson Meller Leite de Oliveira

Registered Agent's Signature (REQUIRED)

(CONTINUED)

(H17000132995 3)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	GERSON MELLER LEITE de OLIVEIRA
	3311 NE 57TH COURT FORT LAUDERDALE, FL 33308
AMBR	JOHN ASSADI 1345 AVENUE OF THE AMERICAS, 11TH FLR NEW YORK, NY 10105
(Use attachment if necessary)	
ffective date is listed, the date must be sp e of filing.)	e of filing: (OPTIONAL)  becific and cannot be more than five business days prior to or 90 day  meet the applicable statutory filing requirements, this date will not be
ument's effective date on the Department LEVI: Other provisions, if any.	
vow provious, it sur,	

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Typed or printed name of signce

LAWRENCE A. KIRSCH

6 Ph 12: 20

LH17W0132-9953)