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FLORIDA LIMITED LIABILITY CO.
MN 3036 LLC

Certificate of Status	1
Certified Copy	0
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ARTICLES OF ORGANIZATION OF MN 3036 LLC

ARTICLE I NAME

The name of the Limited Liability Company shall be:
MN 3036 LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
3036 Mc Donald Street Miami FL 33133


ARTICLE III PURPOSE

This company shall have perpetual existence and may engage in any and lawful business under the laws of the United States in the State of Florida.

ARTICLE IV REGISTERED AGENT

The name and Florida Street address of the initial registered agent is:
MARIO R NUÑEZ 3036 Mc Donald Street Miami FL 33133

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 register agent as provided for in Chapter 605, F.S.


Registered Agent's Signature

ARTICLE VI MEMBERS

MARIO R NUÑEZ - MANAGING MEMBER
3036 Mc Donald Street Miami FL 33133

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ARTICLE VII ORGANIZER

The name and address of the person signing these articles is:

MARIO R NUÑEZ – MANAGING MEMBER

3036 Mc Donald Street Miami FL 33133

IN WITNESS WHEREOF, the undersigned member has executed these Articles of Organization, in compliance with Chapter 605 of the Florida Statutes, this 1st day of August of the year 2017.


MARIO R NUÑEZ
 Manager Member

 17 AUG - 1 AM 11:51
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA
CERTIFICATION**STATE OF FLORIDA**

SS

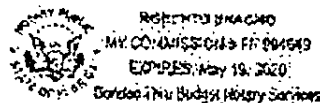
COUNTY OF DADE

BEFORE ME, A Notary Public authorized to take acknowledgements in the state and county set forth above, personally appeared **MARIO R NUÑEZ** to me and known by me to be the person who executed the foregoing Articles of Organization,

IN WITNESS WHEREOF, I have hereunder set my hand and affixed my official seal, in this state and county aforesaid on this 1st Day of August of the year 2017.



NOTARY PUBLIC
 My Commission expires:



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