Electronic Articles of Organization For Florida Limited Liability Company

L17000182074 FILED 8:00 AM August 25, 2017 Sec. Of State jareyes

Article I

The name of the Limited Liability Company is: NAZAREO GROUP LLC

Article II

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

10629 HAMMOCKS BLVD APT 612 MIAMI, FL. 33196

The mailing address of the Limited Liability Company is:

10629 HAMMOCKS BLVD APT 612 MIAMI, FL. 33196

Article III

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

GEYL D GALARZA 15294 SW 104TH ST APT. 10-35 MIAMI, FL. 33196

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.

Registered Agent Signature: GEYL D GALARZA

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR GEYL D GALARZA

15294 SW 104TH ST APT 10-35

MIAMI, FL. 33196

Title: AMBR

LEONARDO NEGRON

10629 HAMMOCKS BLVD APT 612

MIAMI, FL. 33196

Title: AMBR MAX NEGRON

10629 HAMMOCKS BLVD APT 612

MIAMI, FL. 33196

Article V

The effective date for this Limited Liability Company shall be:

08/28/2017

Signature of member or an authorized representative

Electronic Signature: GEYL D GALARZA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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