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FAX No.

P. 001

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**FLORIDA LIMITED LIABILITY CO.  
MAXITACOL2017 LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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ARTICLES OF ORGANIZATIONOFMAXITACOL2017 LLCARTICLE I

The name of the limited liability company is MAXITACOL2017 LLC

ARTICLE II

The address of the principal office and the mailing address of the limited liability company is:

9923 NW 10 Terrace  
Miami, FL 33172

ARTICLE III

The purpose for which this Limited Liability Company is organized is any and all lawful business.

ARTICLE IV

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

Aragon Registered Agents, Inc.  
255 Alhambra Circle  
Suite 500  
Coral Gables, Florida 33134

*Having been named as the 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.*

Date:

10/27/17  
Registered Agent's Signature

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**ARTICLE V**

The name and address of each person authorized to management and control the Limited Liability Company:

**Title:**

**Name and Address:**

Manager

Gabriel Lopez Vargas  
9923 NW 10 Terrace  
Miami, FL 33172

Manager

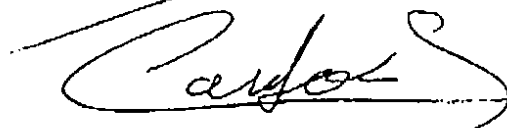
Consuelo Cardozo Castro  
9923 NW 10 Terrace  
Miami, FL 33172

*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.*

Authorized Signee:



Gabriel Lopez Vargas



Consuelo Cardozo Castro

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TALLAHASSEE, FLORIDA

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