#### Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the far made number (shown below) on the top and bottom of all pages of the document.

(((H180001133423)))



Fn 80001133423ABCX

		_ <u></u>	œ
To:		1	APR 12
	Division of Corporations	<del>,                                    </del>	70
	Fax Number : (830)617-6381	ØΣ.	2
F	0 10 00 00	SES	
From:	Account Name : AVILA RODRIGUEZ HERNANDEZ MENA & FIRST LLP	Ļ13.	子
	Account Number: 129070003136	<del></del>	ري
	Phone : (786)594-4102	<u>دي</u>	
	Fax Number : (786)664-3375	ia. Októn	ა 2
	( 20)	المنظ	, ,

RECEIVER
18 APR 12 AM 7: 34
SECRETARY OF STATE

#### FLORIDA LIMITED LIABILITY CO. 3LUCANI LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

N. SAMS APR 1 3 2018

Electronic Filing Menu

Corporate Filing Menu

Help

FAX AUDIT # H18000118342 3

# ARTICLES OF ORGANIZATION OF 3LUCANI LLC

The undersigned, being a duly authorized representative of a member, desiring to form a limited liability company under and pursuant to the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes, does hereby adopt the following Articles of Organization:

#### ARTICLE I NAME

The name of the limited liability company is: 3LUCANI LLC (the "( on pany")

### ARTICLE II ADDRESS

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

Principal Office Address: 2950 Glades Circle, Unit 18 Weston, FL 33327 Mailing Address: 2950 Glades Circle, Unit 18 Weston, FL 33327

# ARTICLE III REGISTERED AGENT. REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Interamerican Corporate Services LLC 2525 Ponce De Leon Blvd., Suite 1225 Coral Gables, Fiorida 33134

Having been named as registered agent and to accept service of process for the above 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 t am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

INTERAMERICAN CORPORATE SERVICES LLC

Maggie Barreto-Tercilla, Manager

00217277.DOC v.1 FAX AUDIT # H18000118342 3 FAX AUDIT #H18000113342 3

## ARTICLE IV OPERATING AGREEMENT

The power to adopt, alter, amend, or repeal an operating agreement for the Company shall be vested in the Members of the Company.

### ARTICLE V MANAGEMENT

The name and address of each person authorized to manage and con rol the Limited Liability Company:

<u>Title:</u> Manager	Name and Address: Nicola Pasquale 2950 Glades Circle, Unit 18 Weston, FL 33327	18 APR 12
Manager	Yanet Notarfrancesco 2950 Glades Circle, Unit 18 Weston, FL 33327	2 TH
Manager	Yanella Pasquate 2950 Glades Circle, Unit 18	3: 32 Lerion

IN WITNESS WHEREOF, the undersigned hereby executes these Articles of Organization as of the 11th day of April, 2018.

Weston, FL 33327

Maggie Barreto-Tercilla

Duly Authorized Representative of a Member