Electronic Articles of Organization For Florida Limited Liability Company

L18000128270 FILED 8:00 AM May 22, 2018 Sec. Of State tbcollins

Article I

The name of the Limited Liability Company is: FIRST BORN SAN MANYEN THRIFT STORE, LLC.

Article II

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

3578 FOWLER ST FORT MYERS, FL. 33901

The mailing address of the Limited Liability Company is:

3578 FOWLER ST FORT MYERS, FL. 33901

Article III

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

JUDITH JOSEPH 1907 GOLDEN GLADE CT APT 102 TAMPA, FL. 33612

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: JUDITH JOSEPH

Article IV

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

Title: MGR MAXON GASPARD 241 NW 152ND AVE.

PEMBROKE PINES, FL. 33028

Title: AMBR STEVENSON DEMARAIS

1642 PASSAIC AVE FORT MYERS, FL. 33901

Title: AMBR JUDITH JOSEPH

1907 GOLDEN GLADE CT, APT 102

TAMPA, FL. 33612

Article V

The effective date for this Limited Liability Company shall be:

05/22/2018

Signature of member or an authorized representative

Electronic Signature: JUDITH JOSEPH

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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