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## FLORIDA LIMITED LIABILITY CO. VITOLO GROUP LLC

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## ARTICLES OF ORCANIZATION FOR FLORIDALIMITED LIABILITY COMPANY. ARTICLE I - Name: The name of the Limited Liability Company is: VITOLO GROUP L L C (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Addréss:

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

MIAM

City

Principal Office Address:	Mailing Address:
13401 SW 23RD ST	13401 SW 23RD ST
MIAMI	MIAMI
FLORIDA 33175	FLORIDA 33175
ARTICLE III - Registered Agent, Registered Office, & Regist (The Limited Limbility Company cannot serve as its own Register another business emity with an active Florida registration.)  The name and the Florida proceedings (51)	ed Agent. You must designate an individual or
The name and the Florida street address of the registered agent ar	₩ . —
VICTOR J HERNANDEZ	<u></u>
Name	
13401 SW 23RD ST	
Florida street address (P.O. B	ox MOT acceptable)

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 us provided for in Chapter 605, F.S.,

State

Zlp

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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"AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
	VICTOR J HERNANDEZ	
	13401 SW 23RD ST	
	MIAMI FL 33175	·r
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EV: Effective date, if other than the date of ective date is listed, the date must be speci	filing: JUNE 01, 2018  fit and causet be more than five business de	PTKINAL) 74 prior to or 9
of filing.) the date inserted in this block does not mee ment's effective date on the Department of EVI: Other provisions, if any.	at the applicable statutory filing requirements, State's records.	this date will ac
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REQUIRED SIGNATURE:	per or an authorized representative of a me	

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