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TO: Registration Section

Division of Corporations

SUBJECT: 29 SOUTH OXALIS DRIVE, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter Lopez 722 Hartford Avenue SW Palm Bay, Florida 32908

E-mail address (to be used for future annual report notification): jonathansoto.nj@gmail.com

For further information concerning this matter, please call:

Jonathan Soto (973) 902-8525

Enclosed is a check for the following amount: \$125.00 Filing Fee

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION OF 29 SOUTH OXALIS DRIVE, LLC



ARTICLE I - NAME

The name of the limited liability company is 29 SOUTH OXALIS DRIVE, LLC, ("company").

ARTICLE II - ADDRESS

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

Principal Office Address: 29 South Oxalis Drive Orlando, Florida 32807 Mailing Address: 722 Hartford Avenue SW Palm Bay, Florida 32908

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Pedro Lopez 722 Hartford Avenue SW Palm Bay, Florida 32908

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 as provided for in Chapter 605, F.S.

Pedro Lopez

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

MGR

Jonathan Soto

367 Delawanna Avenue Clifton, New Jersey 07014

MGR

Carmen Soto

367 Delawanna Avenue Clifton, New Jersey 07014

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 605.205(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jonathan Soto

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0114 or 605.0116, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ICONIC BAY II, LLC, SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA:

- 1. The name of the Limited Liability Company is 29 SOUTH OXALIS DRIVE, LLC.
- 2. The name and the Florida street address of the registered agent and office are:

PETER LOPEZ
772 Hartford Avenue SW
Palm Bay, Florida 32908
(Post office box is NOT 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 as provided for in Chapter 605, Florida Statutes.

Peter Lopez

Registered Agent