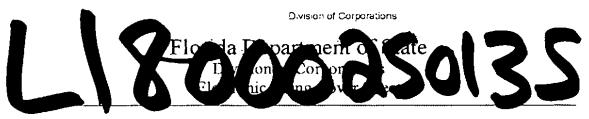
To: 18506176381 From: 14694451465 Date: 10/25/18 Time: 10:06 AM Page: 01/04

10/25/2018



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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALING CORPORATE SERVICES INC.

Account Number : I20180000011 : (844)386-0178 Fax Number : (214)317-4754

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one annual referements

FLORIDA LIMITED LIABILITY CO. JRV FINANCIAL SOLUTIONS, LLC

Certificate of Status	0
Certified Copy	1
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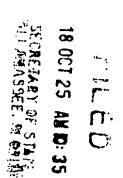
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Date: October 25, 2018

ARTICLE I - NAME:

The name of the Limited Liability Company is:

JRV FINANCIAL SOLUTIONS, LLC



ARTICLE II - ADDRESS:

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

6700 NE 22ND WAY APT 2209 FORT LAUDERDALE, FL 33308

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

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

JOAQUIN VELOZ

Name

6700 NE 22ND WAY APT 2209

Florida Street Address

FORT LAUDERDALE, FL 33308

City, State, and Zip

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To: 18506176381 From: 14694451465 Date: 10/25/18 Time: 10:06 AM Page: 03/04

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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 605.0203 (1) (b).

Registered Agent's Signature

JOAQUIN VELOZ

<u>ARTICLE IV - MANAGEMENT</u>

The Limited Liability Company is to be considered a single member LLC and is therefore a SINGLE MEMBER LLC company with single manager. The NAME and ADDRESS of initial MANAGER/MEMBER are as follows:

Title

Authorized Member

Name and Address: JOAQUIN VELOZ 6700 NE 22ND WAY APT 2209

FORT LAUDERDALE, FL 33308

-continued-

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ARTICLE V BUSINESS DEDUCTIONS

Per IRS regulations the corporation may pay and deduct the health insurance and medical expenses of its directors and employees. Additionally, business auto expenses may be reimbursed to directors and employees and thus deducted from current operations.

ARTICLE VI - EFFECTIVE DATE

The effective date of the Limited Liability Company shall be: NOVEMBER 1st, 2018.

Signature of member or an authorized representative of a member

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.

JOAQUÍN VELOZ Montheri Manager of LLC

October 25, 2018