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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : REGIONES UNIDAS CORP.
Account Number : I20180000087
Phone : (954)344-3555
Fax Number : (954)344-4494

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

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**FLORIDA LIMITED LIABILITY CO.
SHALOM SPA, LLC**

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**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY
OF:**

ARTICLE I - NAME

The name of the Limited Liability Company is:

SHALOM SPA, LLC

ARTICLE II - ADDRESS:

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

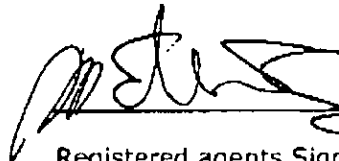
**1400 E HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441**

ARTICLE III - Registered Agent, Registered Office & Registered Agent Signature:

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

**MARIA ELENA VILLALOBOS
500 NE 41TH STREET APT. 206
POMPANO BEACH, FL 33064**

Having been named as registered agent and to accept service of process at for the above stated corporation at the place designated in these Articles of Incorporation, 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 agents Signature (REQUIRED)

Prepared by:
Firmo Maldonado c/o Regiones Unidas
8010 W. Sample Road
Coral Springs, FL 33065
Phone (954) 344-3555

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ARTICLE IV - Manager(s) or Managing Member(s)

The name and address of each Manager and managing Members is as follows:

**MGRM:
MARIA ELENA VILLALOBOS
500 NE 41TH STREET APT. 206
POMPANO BEACH, FL 33064**

ARTICLE IV - Effective Date

November 8th, 2018



MARIA ELENA VILLALOBOS/Manager

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