

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L18000275773  
FILED 8:00 AM  
November 29, 2018  
Sec. Of State  
rekemple**

**Article I**

The name of the Limited Liability Company is:

CENTRO DE TRANSFORMACION Y LIDERAZGO IMPACTO VITAL LA  
ACADEMIA LLC

**Article II**

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

50 TROTTERS CIRCLE  
KISSIMMEE, FL. 34743

The mailing address of the Limited Liability Company is:

50 TROTTERS CIRCLE  
KISSIMMEE, FL. 34743

**Article III**

Other provisions, if any:

RESPONSIBLE FOR DIRECT SALES, PROCESSING CREDIT REPAIR  
CONTRACTS AND MAINTAINING HIGH STANDARDS CUSTOMER SERVICE  
AND CREATE WORK SHOPS FOR LEARN ABOUT CREDIT SCORE AND  
LEADERSHIP FOR MANAGE LIFE IN RESPONSIBILITIES AND  
INTEGRITY.

**Article IV**

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

LUIS F CONDE  
50 TROTTERS CIRCLE  
KISSIMMEE, FL. 34743

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: LUIS F CONDE

## **Article V**

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

Title: PRES  
LUIS F CONDE JR  
50 TROTTERS CIRCLE  
KISSIMMEE, FL. 34743

Title: VP  
LUIS H CONDE SR  
50 TROTTERS CIRCLE  
KISSIMMEE, FL. 34743

Title: SECR  
FRANCES L LICEAGA MRS.  
50 TROTTERS CIRCLE  
KISSIMMEE, FL. 34743

Title: MGR  
ESTEFANIA S SAINT-AMAND  
50 TROTTERS CIRCLE  
KISSIMMEE, FL. 34743

Title: MGR  
RAFAEL E MONGE  
3806 HIDEAWAY BAY BLVD UNIT 203  
KISSIMMEE, FL. 34741

## **Article VI**

The effective date for this Limited Liability Company shall be:

12/01/2018

Signature of member or an authorized representative

Electronic Signature: LUIS F CONDE

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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