

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

L19000107276  
FILED 8:00 AM  
April 19, 2019  
Sec. Of State  
jafason

**Article I**

The name of the Limited Liability Company is:  
MULTIPLY VACATION HOMES LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
111 NORTH ORANGE AVENUE  
8TH FLOOR #800  
ORLANDO, FL. 32801

The mailing address of the Limited Liability Company is:  
8850 NW 36TH ST  
#2411  
DORAL, FL. 33178

**Article III**

The name and Florida street address of the registered agent is:  
AGNALDO FONSECA  
8850 NW 36TH ST  
#2411  
DORAL, FL. 33178

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: AGNALDO FONSECA

### **Article IV**

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

Title: P  
AGNALDO FONSECA  
8850 NW 36TH ST #2411  
DORAL, FL. 33178

Title: VP  
CHRISTIANNE LEON  
6142 NW 115 PL #319  
DORAL, FL. 33178

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### **Article V**

The effective date for this Limited Liability Company shall be:

04/18/2019

Signature of member or an authorized representative

Electronic Signature: AGNALDO FONSECA

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.