

4/30/2019

Division of Corporations

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Florida Department of State
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To:

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Fax Number : (850)617-6381

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Account Name : MENDEZ ACCOUNTAX SERVICES, CORP
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**FLORIDA LIMITED LIABILITY CO.
ALIEN16 STARS TATTOO, LLC.**

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:

ALIEN16 STARS TATTOO, LLC.

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 2000 NE 135TH ST APT 405, NORTH MIAMI FL 33181

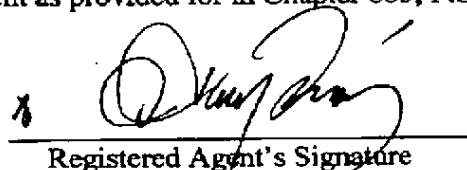
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ARTICLE III- Registered Agent, Registered Office, & Registered Agent's Signature:

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

**ALIEN PEREZ PARRA
2000 NE 135TH ST APT 405
NORTH MIAMI, FL 33181**

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at 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.


Registered Agent's Signature

ARTICLE IV:

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

Title:

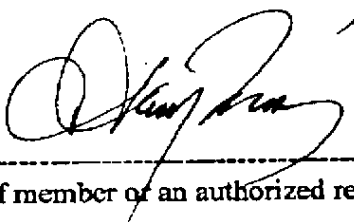
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Name and Address:

**ALIEN PEREZ PARRA
2000 NE 135TH ST APT 405
NORTH MIAMI, FL 33181**

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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. I am aware that any 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.)

ALIEN PEREZ PARRA

Typed or printed name of signee.