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FLORIDA LIMITED LIABILITY CO. LEISA, LLC

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

May 1, 2019

SUBJECT: LEISA, LLC REF: W19000042451

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Cant make out the Suite # in Article II the Registered Agents address the first number.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H19000143231 Letter Number: 719A00008687 的,我们也是一个人,我们是一个人,我们是一个人,我们是一个人,我们是一个人,我们是一个人,我们是一个人,我们是一个人,我们是一个人,我们是一个人,我们是一个人,我

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is: Other end with the words "Limited Liability Company,"

Leisa, LLC

ARTICLE II - Address:

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

3101 NW 77 th St. Suite 607 Hiemi, FL, 33147.

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

Asiel Hernandez Rodriguez. 1440 SW 119 El, Miami, FL. 33184

ARTICLE IV-

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

Asiel Hernandez RODRIGUEZ (AMBR)

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Required Signatures:

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Signature of a 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.

Typed or printed name of signee (

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/F.S..

Registered Agent's Signature (REQUIRED)