L19000132837

Florida Department of State

Division of Corporations

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FLORIDA LIMITED LIABILITY CO.

BM SMART INVESTMENTS LLC

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MAY 24 2019

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

BM SMART INVESTMENTS, LLC
(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
16400 COLLINS AVE, APT 445	16400 COLLINS AVE, APT 445
SUNNY ISLES BEACH, FL 33160	SUNNY ISLES BEACH, FL 33160

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

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

RODNEY LOPES ESDRAS
Name

16400 COLLINS AVE, APT 445
Florida street address (P.O. Box NOT acceptable)

SUNNY ISLES BEACH FLORIDA 33160
City State Zip

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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)

(CONTINUED)

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

Title:		Name and Address:
"AMBR" = Authorized Member "MGR" = Manager		
AMBR		LOPES ESDRAS, RODNEY 16400 COLLINS AVE, APT 445 SUNNY ISLES BEACH, FL 33160
AMBR		DE OLIVEIRA ESDRAS, GISELE MARIA 16400 COLLINS AVE, APT 445 SUNNY ISLES BEACH, FL 33160

(Use attachment if necessary)

ARTICLE V: Effective date if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any:

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

RODNEY LOPES ESDRAS
Typed or printed name of signee