To: 18506176381 From: 14694451465 Date: 06/24/19 Time: 3:21 PM Page: 01/04

6/24/2019

Division of Corporations

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

\*\*Enter the email address for this business entity to be used for future \_\_\_\_annual report mailings. Enter only one email address please.\*\*

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### FLORIDA LIMITED LIABILITY CO. SAMARY HOLDINGS 1, LLC

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# ARTICLES OF ORGANIZATION OF SAMARY HOLDINGS 1, LLC,

a Florida Limited Liability Company

#### ARTICLE I

NAME

The name of this Limited Liability Company is:

#### SAMARY HOLDINGS 1, LLC.

#### ARTICLE II

#### **PURPOSE**

- A. Purposes. The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to Chapter 605, Fla. Stat., as the same may be amended from time to time.
- B. Powers. The Company shall have and may exercise all powers and rights which a limited liability company may exercise pursuant to Chapter 605, Fla. Stat., as the same may be amended from time to time.

#### ARTICLE III

#### **ADDRESS**

The mailing and street address of the Company's principal place of business is:

#### 5751 SW 50 Street Miami, Florida 33155

#### ARTICLE IV

#### DURATION

The period of duration of the Company shall be perpetual. The remaining members are given the right to continue the business of the limited liability company on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member, upon a meeting and unanimous vote within sixty (60) days of said event(s) to continue said business.



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#### ARTICLE V

#### MANAGEMENT

The management of the Company is reserved to one of the members, and is therefore a member manager managed company. The member manager of the company is:

Samuel Rafael Monti, whose address is: 5751 SW 50 Street, Miami, Florida 33155

#### ARTICLE VI

INITIAL ADDRESS OF REGISTERED OFFICE AND DESIGNATION OF REGISTERED AGENT

The street address of the initial registered office of this limited liability company in the State of Florida is:

Samuel Rafael Monti, whose address is: 5751 SW 50 Street, Miami, Florida 33155

The Registered Agent of the limited liability company may be changed at any time by the manager without an amendment to these articles.

THESE ARTICLES OF ORGANIZATION have been executed by the undersigned member or authorized representative of the member on June 24, 2019.

In accordance with Chapter 605, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Samuel raf**a**el Moñti

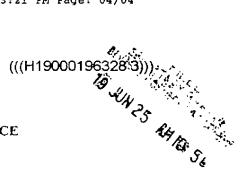
STATE OF FLORIDA ) ss.
COUNTY OF BROWARD )

The foregoing instrument was acknowledged before me/on June \$\frac{2}{2}\$, \$\frac{2019}{2019}\$, by SAMUEL RAFAEL MONTI [\*] who is personally known to me or [//] who has produced a Florida Driver's License as identification and who did take an oath.

ROBERTO F. FLETTAS III
MY COMMISSION II GG 064000
EXPIRES: February 1, 2021
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NOTARY PUBLIC STATE OF FLORIDA

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#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE OF SAMARY HOLDINGS 1, LLC.

PURSUANT TO THE PROVISIONS OF SECTION 605.0203(1)(b), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT DESIGNATING THE REGISTERED OFFICE AND REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the Limited Liability Company is:

#### SAMARY HOLDINGS 1, LLC

2. The name and address of the registered agent and office is:

## Samuel Rafael Monti, whose address is: 5751 SW 50 Street, Miami, Florida 33155

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. Fla.Stat.2

SAMUEL RAFAEL MONTI

June 24, 2019

STATE OF FLORIDA

) s

COUNTY OF BROWARD )

The foregoing instrument was acknowledged before me on June  $\underline{24}$ , 2019 by SAMUEL RAFAEL MONTI who [ $\checkmark$ ] is personally known to ine or/[ $\cdot$ ] who has produced a Florida Driver's License as identification and who did take an oath:

ROBERTO F. FLETTAS IN MY COMMISSION & GG 064000 EXPIRES: February 1, 2021 Bunsed That Notes; Public Uniformities

NOTARY PUBLIC-STATE OF FLORIDA

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