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Division of Corporations

Page 1 of 2

**Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

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Email Address: _____

FLORIDA LIMITED LIABILITY CO.

TSZM, LLC

*****PLEASE PROVIDE
THE ORIGINAL
SUBMISSION DATE OF
7/1/2019*****

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**ARTICLES OF ORGANIZATION OF
TSZM, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I

NAME

The name of the Limited Liability Company is TSZM, LLC (the "Limited Liability Company").

ARTICLE II

ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 1688 Meridian Avenue, Suite 600 & 700, Miami Beach, Florida 33139.

ARTICLE III

REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

The name and Florida street address of the Limited Liability Company's registered agent are Capitol Corporate Services, Inc., 515 East Park Avenue, 2nd Floor, Tallahassee, Florida 32301.

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 of the Florida Statutes.

Capitol Corporate Services, Inc.

By: Kim Tadlock Kim Tadlock, Asst. Sec. on behalf
of Capitol Corporate Services, Inc.

Date: July 3, 2019


John D. Owens, III, Authorized Person

This document is executed in accordance with Section 605.0203(1)(b) of the 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 Section 817.155 of the Florida Statutes.