

Division of Corporations

Page 1 of 2

L19000215812

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000262164 3)))



H190002621643ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : FOWLER WHITE BURNETT P.A.
Account Number : 071250001512
Phone : (305) 789-9200
Fax Number : (786) 437-4609

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: rrazook@fowler-white.com

**FLORIDA LIMITED LIABILITY CO.
ABRA ONE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED
DIVISION OF CORPORATIONS
19 AUG 30 AM 8:46
TALLAHASSEE, FLORIDA

Audit No. H19000262164 3

**ARTICLES OF ORGANIZATION
OF
ABRA ONE, LLC**

ARTICLE I

The name of the limited liability company formed hereby is ABRA ONE, LLC (the "Company").

ARTICLE II

The duration of the Company shall be perpetual.

ARTICLE III

The principal office and mailing address of the Company shall be as follows:

2645 Executive Park Drive, Suite 144
Weston, Florida 33331

ARTICLE IV

The Registered Agent of the Company and his street address in the State of Florida are as follows:

Juan Jose Cruz Borda
2645 Executive Park Drive, Suite 144
Weston, Florida 33331

Audit No. H19000262164 3

SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 AUG 30 AM 8:46
TALLAHASSEE, FLORIDA

1/4

Audit No. H19000262164 3


ARTICLE V

The Company shall be manager-managed. The names and addresses of the initial Managers are as follows:

Santiago Vasquez Obando
55 NE 5th Avenue, Suite 501
Boca Raton, Florida 33432

Jose Pablo Mesa Ramirez
55 NE 5th Avenue, Suite 501
Boca Raton, Florida 33432

Juan Jose Cruz Borda
2645 Executive Park Drive, Suite 144
Weston, Florida 33331



Santiago Vasquez Obando,
as Authorized Representative of the Members

Audit No. H19000262164 3

Audit No. H19000262164 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
AND ACCEPTANCE OF DESIGNATION

Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

1. The name of the limited liability company is ABRA ONE, LLC.
2. The name and address of the Registered Agent and Office is:

Juan Jose Cruz Borda
2645 Executive Park Drive, Suite 144
Weston, Florida 33331

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.

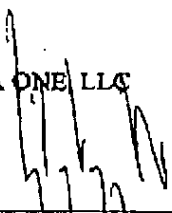


Juan Jose Cruz Borda, Registered Agent

Date: 08/29/2019

ABRA ONE, LLC

By:


Santiago Vasquez Obando,
as Authorized Representative
of the Members

Audit No. H19000262164 3

SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 AUG 30 AM 8:46
TALLAHASSEE, FLORIDA