To: 18506176381 From: 12143052508 Date: 09/23/19 Time: 2:43 PM Page: 01/03

9/23/20: Division of Corporations ision of nic Fili

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To:

Division of Corporations

Fax Number : (850)617-6381

Prom:

Account Name : LEGALINC CORPORATE SERVICES INC.

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

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

Email Address:

FLORIDA LIMITED LIABILITY CO.

CapCO Astor, LLC

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ARTICLES OF ORGANIZATION OF CapCO ASTOR, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company shall be:

CapCO ASTOR, LLC.

ARTICLE II - ADDRESS

The mailing address is 7300 N. Kendall Dr., Suite 520, Miami, FL 33156 and the street address of the principal office of the Limited Liability Company is 7300 N. Kendall Dr., Suite 520, Miami, FL 33156.

ARTICLE III – REGISTERED AGENT

(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 street address of the initial registered agent are:

Giorgio L. Ramirez, Esq. 7300 N. Kendall Drive, Suite 520 Miami, FL 33156

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

ARTICLE IV - AUTHORIZED MEMBER(S) OR MANAGER(S)

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

AMBR

Alejandro Martinez

1618 Sand Hill Road, # 105

Palo Alto, CA 94304

AMBR

Ronald Chirinos

11861 SW 144 Court, Suite 1

Miami, FL'33196

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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 in a document to the Department of State constitutes a third degree felony as provided for in §817:155; F.S.)

Giorgio L. Ramirez, Esq. Attorney in Fact and Registered Agent