Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

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: (305)444-4977 Fax Number

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

	Address:			
- naii	Address:			

FLORIDA LIMITED LIABILITY CO. KAIROS INVESTMENT MF GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

J. FASON

SEP 3 0 2019

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	CENT MF GROUP, LLC		
(Must con	tain the words "Limited !	Liability Company, '	'L.L.C.," or "LLC.")
RTICLE II - Address:			
ne mailing address and street a	ddress of the principal o	ffice of the Limited	Liability Company is:
<u>Princip</u>	nal Office Address:		Mailing Address:
2828 CORAL WAY			CORAL WAY
SUITE#100			E #100
MIAMI, FL 33145 RTICLE III - Registered Ag the Limited Liability Compan	y cannot serve as its own	MIAI & Registered Agent. Y	MI, FL 33145 t's Signature:
MIAMI, FL 33145 RTICLE III - Registered Ag he Limited Liability Companiother business entity with an	y cannot serve as its own active Florida registration address of the registered	MIAI & Registered Agent. Yon.) d agent are:	MI, FL 33145
MIAMI, FL 33145 RTICLE III - Registered Ag	y cannot serve as its own active Florida registratio	MIAI & Registered Agent. Yon.) d agent are:	MI, FL 33145 t's Signature:
MIAMI, FL 33145 RTICLE III - Registered Ag The Limited Liability Companiother business entity with an	y cannot serve as its own active Florida registration address of the registered CHIRLES Y. LEON	MIAI & Registered Agent. You.) d agent are:	MI, FL 33145 t's Signature:
MIAMI, FL 33145 RTICLE III - Registered Ag The Limited Liability Companiother business entity with an	y cannot serve as its own active Florida registration address of the registered	MIAI & Registered Agent. You.) d agent are: Name - SUITE #100	MI, FL 33145 t's Signature: ou must designate an individual
MIAMI, FL 33145 RTICLE III - Registered Ag The Limited Liability Companiother business entity with an	y cannot serve as its own active Florida registration address of the registered CHIRLES Y. LEON 2828 CORAL WAY	MIAI & Registered Agent. You.) d agent are: Name - SUITE #100	MI, FL 33145 t's Signature: 'ou must designate an individual

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 Agont's Signature (REQUIRED)

(CONTINUED)

Titles	Name and Address:				
"AMBR" = Anthonized Member					
"MGR" = Manager	MONTO A MADIA CANCIET EQUEDO				
<u>MG3</u>	MONICA MARIA SANCHEZ FORERO 2828 CORAL WAY - SUTTE #100				
	MIAMI, FL 33145				
	MIAMI, FL 33143				
	•				
(Use sitachment if necessary) CLE V1 Effective date, if other than the date	e of filing: 09/25/2019 (OPTIONAL)				
CLE V1 Effective date, if other than the date effective date is listed, the date must be at the of filling.)	moot the applicable statutory filing requirements, this date will no				
CLE V1 Effective date, if other than the date effective date is listed, the date must be site of filing.) If the date inserted in this block does not	moot the applicable statutory filing requirements, this date will no				
CLE V1 Effective date, if other than the date effective date is listed, the date must be site of filling.) If the date inserted in this block does not occursou's effective date on the Department	socific and cannot be more than five business days prior to or 90 most the applicable statutory filing requirements, this date will no				
CLE V1 Effoctive date, if other than the date effective date is listed, the date must be site of filing.) If the date inserted in this block does not occursent's effective date on the Department CLE VI: Other provisions, if any. REQUIRER SIGNATURE:	specific and cannot be more than five business days prior to or 90 most the applicable statutory filing requirements, this date will not of State's records.				
CLE V1 Effective date, if other than the date effective date is listed, the date must be site of flling.) If the date inserted in this block does not coment's effective date on the Department CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a many that document is executed as a ware that any fals.	moot the applicable statutory filing requirements, this date will no				
CLE V1 Effective date, if other than the date effective date is listed, the date must be site of filing.) If the date inserted in this block does not occursent's effective date on the Department CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a many that document is executed as a second and any fals.	most the applicable statutory filing requirements, this date will not of State's records. The area of State's records. The area of State's records are a statutory filing requirements, this date will not of State's records. The area of State's records are a statute of a member. Ited in accordance with section 605.0203 (1) (b), Florida Statutes, it information submitted in a document to the Dopartment of State of follows as provided for in s.817.155, F.S.				

Filing Fees;
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)