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Division of Corporations	<u> </u>
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Pax Number : (850)617-6381	j. 6
Prom:	<u> </u>
Account Name : ROBERT N. ALLEN, JR., P.A.	· · ·
Account Number: 073324000622	j: <u> </u>
Phone : (305)372-3300	<u>:</u> 3
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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.

Alpha Yachts USA, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$125.00

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To: 18506176381 From: 17868994610 Date: 10/18/19 Time: 3:15 PM Page: 02/03

Fax Audit Number: H19000309908 3

ARTICLES OF ORGANIZATION OF ALPHA YACHTS USA, LLC

Pursuant to the provisions of Section 605.0201 of the Florida Statutes, the above-named Limited Liability company, (the "Company"), provides the following information and adopts the following Articles of Organization:

ARTICLE I NAME

The name of the limited liability company is ALPHA YACHTS USA, LLC

ARTICLE II ADDRESS

The principal place of business address and the mailing address of the Company is 1441 Brickell Avenue, Suite 1400, Miami, FL 33131.

ARTICLE III OTHER PROVISIONS

This Limited Liability Company will be a manager-managed Limited Liability Company and its business purpose will be to engage in any lawful activity as permitted under the Florida Revised Limited Liability Act.

ARTICLE IV REGISTERED AGENT AND REGISTERED OFFICE

The name and the Florida street address of the registered agent and registered office of the Company is Robert Allen Law, 1441 Brickell Avenue, Suite 1400, Miami, FL 33131.

ARTICLE V MANAGEMENT

The name and address of the person(s) authorized to manage the Limited Liability Company is/are:

Title: MGR Name: SPINEL LLC 1201 Orange Street, Suite 600 Wilmington, DE 19801

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ARTICLE VI EFFECTIVE DATE:

The effective date for this Limited Liability Company will be the filing date.

IN WITNESS WHEREOF, the undersigned executed these Articles of Organization on the

/ 8 day of October, 2019.

By:

Claudia Casalis, Authorized Representative

ACCEPTANCE BY RECISTERED AGENT

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 the 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 in Chapter 605 of the Florida Statutes.

Dated as of the /8 day of October, 2019.

Robert Allert any

By:

Undberto Bonavita, President

Preparer:

Claudia Casalis, Esq. Florida Bar No. 0098316

Robert Allen Law (see fictitious name filing for registered agent)

1441 Brickell Avenue, Suite 1400

Miami, FL 33131 Phone (305) 372-3300 Fax: (305) 379-7018 9 OCT 21 PM 4: 13