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OCT 22 2019

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H19000312309 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : OSBORNE & OSBORNE, P.A.

Account Number : I20000000119

Phone

: (561)395-1000

Fax Number

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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.

FLORIDA LIMITED LIABILITY CO. PALLAS CAPITAL, LLC.

Certificate of Status	0
Certified Copy	0
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Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR PALLAS CAPITAL, L.L.C.

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

PALLAS CAPITAL, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 3745 Pyrite Drive Orlando, FL 32826

Malling Address: 3745 Pyrite Drive Orlando, FL 32826

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

R. Brady Osborne, Jr. 1515 S. Federal Highway Sulte 106 Boca Raton, Florida 33432

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.

R. Brady Osbome, or.

(CONTINUED)

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ARTICLE IV -

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Pallas Capital, Inc.

ADDRESS

3745 Pyrite Drive Orlando, FL 32826

ARTICLE V: Effective date is October 22, 2019

ARTICLE VI:

The Limited Liability Company shall exist perpetually or until dissolved in a manner provided by law, or as provided in the Articles of Organization adopted by the Members. The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

REQUIRED SIGNATURE:

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 submitted in a document to the

Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

R, Brady Osborne, Jr.

Typed or printed name of signee

HILLIBRARY/19/28663/DOC/ARTICLES OF ORGANIZATION.RBO.wpd

TO:

FLORIDA DEPARTMENT OF STATE

FAX NUMBER: (850)617-6381

FROM:

CLARA GIRALDO E.A.

SUBJECT:

LAGOS USA, LLC

DOCUMENT NUMBER: N/A

I am contacting you to because i need you void the cover sheet number H190003112893

ATTACH DOCUMENTS

PLEASE SEND BY FAX: 305-485-1098

THANK YOU

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