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## Florida Department of State

## Division of Corporations Electronic Filing Cover Sheet

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.

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : VIDAL FINANCIAL, INC.

Account Number : I20190000097 Phone : (305)631-0331

Fax Number : (30

: (305)854-3131

ngg u 2 2019

\*\*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. SINGASONG.COM, LLC

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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabilit	y Company is:						
SINGASONG.COM,	LLC tin the words "Limited L	inkilih. Comman	ent t C " or el l C "				
(Must cona	in the words Limited L	lability Company	, L.L.C., or title.				
ARTICLE II - Address: The mailing address and street ad	ldress of the principal of	fice of the Limito	d Liability Company is:				
<u>Princip</u>	al Office Address:		Mailing Address:				
1480 STILLWATER MIAMI BEACII, FL		<u>SA</u>	ME AS PRINCIPAL				
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street a	cannot serve as its own l active Florida registration	Registered Agent. i.)	ent's Signature: . You must designate an individual or				
	JOSE VAZQUEZ		<u> </u>				
Name							
	1480 STILLWATER	DRIVE					
	Florida street address	(P.O. Box <u>NOT</u>	acceptable)				
	MIAMI BEACII_	FL	33141				
	City	State	Zip				

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.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

19 DEC -2 PH 1:53

ARTICLE IV-

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	JOSE VAZQUEZ	
	JOSE VAZQUEZ  1480 STILLWATER DRIVE	
	MIAMI BEACH, FLORIDA 33141	
	<del> </del>	
EV: Effective date, if other than the dat extive date is listed, the date must be sp	e of filing: (OPTIONAL pecific and cannot be more than five business days prior to	.) o or 90
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