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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/19/19

NAME: CDG DEVELOPERS LLC

TYPE OF FILING: ARTICLES

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125.00

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AUTHORIZATION: ABBIE/PAUL

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: CDG Developers LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Milton Daniel Vergara Name of Person
CDCa Developers LLC Firm/Company
1110 Brickell Ave STE (007 Address
City/State and Zip Code Who Organization.red E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Milton Vergasa at 754 422 9250 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status □\$155.00 Filing Fee Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address
New Filing Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must conatin the words "Limited Liabil	
ARTICLE II - Address: The mailing address and street address of the principal office of	
Principal Office Address:	Mailing Address:
STE GOT	
MIAMI, FL 38131	MIAMI, FL 33131
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Registanother business entity with an active Florida registration.)	gistered Agent's Signature: stered Agent. You must designate an individual or
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Regist another business entity with an active Florida registration.) The name and the Florida street address of the registered agent	gistered Agent's Signature: stered Agent. You must designate an individual or t are: Lopers LLC ne
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Regist another business entity with an active Florida registration.) The name and the Florida street address of the registered agent R. E. Deve Name	gistered Agent's Signature: stered Agent. You must designate an individual or t are: Lopers LLC ne Ave SIE GOT

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)

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	0 1 1 1 6	
AMBR	Prolitera LUC 4451 E Seneca Ave Weston, FL 33332	
AMBR	R.E. Developers, LLC. 1110 Brickell Ave STE MIAMI, FL 33131	607
(Use attachment if necessary)		
CLE V: Effective date, if other than the dat	te of filing: 12 17 2019 (OPTIC pecific and cannot be more than five business days pr	ONAL) rior to or 90 days a
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The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-