1/9/2020



Division of Corporations **Electronic Filing Cover Sheet**

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Email Address:

FLORIDA LIMITED LIABILITY CO. **INFIGURA 365, LLC**

Certificate of Status	0
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J. FASON

JAN 1 0 2020

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

				LEADING COMPANY	
ARTICLE 1-1	Name:				
	Limited Liability	Company is:			
e2.1m					
INF	IGURA 365, LLC				
	(Must conat	in the words "Limit	ed Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II -	Address:				
The mailing add	ress and street ad	dress of the princip	d office of the Limited	Liability Company is:	
•		and of the bridity	TOTALCO OF THE EMILION	Claulity Company IS.	
	Principa	Office Address:		Mailing Address:	
160	 3 S.W. 101ST TE	3R ·	SAM	ie.	
	MI, FL 33196	· · · · · · · · · · · · · · · · · · ·			
another busines	ability Company on a contity with an ac	at, Registered Office annot serve as its o stive Florida registra ddress of the registe	tion.)	t's Signature: 'ou must designate an individual or	
	[.		-		
		ZOIKA ALVARE			
	ŀ		Name		
		16013 S.W. 1015	TER		
			ess (P.O. Box NOT ac	ceptable)	
		MIAMI	FL	33196	
	I .				

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 Agent's Signature (REQUIRED)

(CONTINUED)

2020 JAN -9 AH 10: 49

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	JAVIER MILIAN
	16013 S.W. 101ST TER
	MIAMI, FI. 33196
·	
fective date is listed, the date must be s	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
LE V: Effective date, if other than the da fective date is listed, the date must be s of filing.) If the date inserted in this block does not amon's effective date on the Department LE VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 timeet the applicable statutory filing requirements, this date will not at of State's records.
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EV: Effective date, if other than the date fective date is listed, the date must be soffiling.) If the date inserted in this block does not amen's effective date on the Department. EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a in This document is exect I am aware that any fall constitutes a third degree.	meet the applicable statutory filing requirements, this date will not at of State's records. The interval authorized representative of a member auted in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State.