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FLORIDA LIMITED LIABILITY CO. MORA MOTORS LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

JAN 2 4 2020

T. SCOTT

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20 JAN 23 PH 2: 45

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:						
Mo	RA Motors LLC					
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:						
921 S PAR	code 33021					
FT SIP	code 33021					
The name and the Company cannot set	ARTICLE III - Registered Agent, Registered Office: ne Florida street address of the registered agent are: (The Limited Lerve as its own Registered Agent. You must designate an individual or another be siness enti- with an active Florida registration.) PERA-220					
	RK ROAD APT 203 HOllywoo	od Fl				
zip code	33021					
The name and	ARTICLE IV I title of each person authorized to manage and control the Lin Liability Company: (MGR or AMBR)	nited				
Ramiro	MARTÍN PERAZZO AMBR	020 JA				
	4	N 23				
		N A				

Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution 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. 3.

MONICA PURA SAJNOVICK
Typed or printed name of signee

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 herel: y 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 agen: as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)