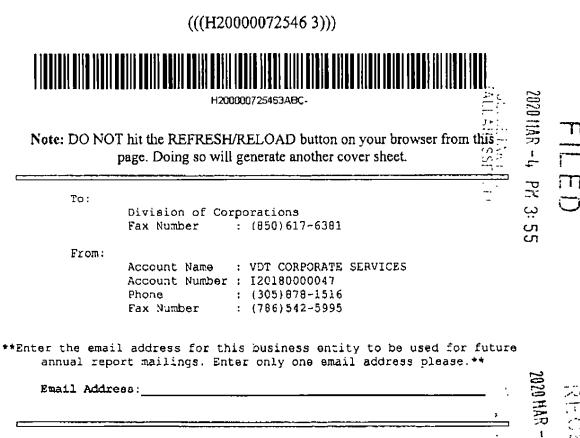
https://efile.sunbiz.org/scripts/efilcovr.exe



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.



FLORIDA LIMITED LIABILITY CO. Serenity Capital Holdings LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$125.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

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| 19 | COVE | R LETTER | | ., | |
|-----------|--|--|----------|----------|-----|
| TO: | New Filing Section Division of Corporations | | | | |
| SUBJE | Serenity Capital Holdings LLC | | | | |
| SUBJE | | d Liability Company | | | |
| The end | closed Articles of Organization and fee(s) are su | bmitted for filing. | | | |
| Please | return all correspondence concerning this matter | to the following: | Ž.S. | 2021 | |
| | JOAO PEDRO VOLZ | | | 2020 HAR | 7 |
| | 7 | Name of Person | SS | 1-1 | Ī |
| | VDT CORPORATE SERVICES LLC | | | P | ; T |
| | | Pirm/Company | • | بب | Ò |
| | 150 SE 2ND AVE SUITE 905 | | | 2 | |
| | | Address | | | |
| | MIAMI, FL 33131 | | | | |
| | City/ MANAGEMENT@SAINTJOSEPHGRO | State and Zip Code UP,COM | | | |
| | E-mall address: (to be used for | future annual report notification) | | | |
| For furth | er information concerning this matter, please ca | ll); | | | |
| | JOAO PEDRO VOLZ 305 | 503-9867 | | | |
| | | Code Daytime Telephone Number | | | |
| Enclase | ed is a check for the following amount: | | | | |
| | 0 Piling Fee \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & \$160.00 Filing Certificate of Standard Copy (additional copy is enclosed) | Status & |) | |
| | Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tollphasses FL 32314 | Street Address New Filing Section Division of Corporations Clifton Building | | | |

Tallahasscc, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | |
|--|--|
| Serenity Capital Holdings LLC | |
| (Must contain the words "Limited Liah | nility Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the principal office | e of the Limited Liability Company is: |
| Principal Office Address: | Malling Address: |
| 150 SE 2ND AVE SUITE 906 | 150 SE 2ND AVE SUITE 908 |
| MIAMI, FL 33131 | MIAMI, FL 33131 |

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

| MIAMI | FL | 33131 |
|----------------------|----------------------------|-----------|
| Florida street addre | ss (P.O. Box <u>NOT</u> ac | ccptable) |
| 150 SE 2ND AVE SUIT | E 905 | |
| | Name | |
| VDT CORPORATE SE | RVICES LLC | |

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)

gent's Signature (REQUIRED)

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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| <u>ïtle:</u> | Name and Address: |
|---|---|
| MBR" = Authorized Membe | : |
| AOR" = Manager | |
| GR | VDT CORPORATE SERVICES LLC |
| | 150 SE 2ND AVE SUITE 905 |
| | MIAMI, FL 33131 |
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| V: Effective date, if other tha tive date is listed, the date m | n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior to or 90 |
| tive date is listed, the date m filing.) | oes not meet the applicable statutory filing requirements, this date will not |
| V: Effective date, if other that tive date is listed, the date m filling.) he date inserted in this block cent's effective date on the De | oes not meet the applicable statutory filing requirements, this date will not |
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