Electronic Articles of Organization For Florida Limited Liability Company

L20000071928 FILED 8:00 AM March 04, 2020 Sec. Of State

Article I

The name of the Limited Liability Company is: STRONG BUSINESS SOUTIONS, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

328 DEXTER DR FORT MYERS, FL. US 33905

The mailing address of the Limited Liability Company is:

328 DEXTER DR FORT MYERS, FL. US 33905

Article III

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

DEXTER PENARANDA 5820 HARBORAGE DR FORT MYERS, FL. 33908

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.

Registered Agent Signature: DEXTER PENARANDA

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR DEXTER PENARANDA 5820 HARBORAGE DR FORT MYERS, FL. 33908 US

Title: PRES ALBERTO CABALLERO 328 DEXTER DR FORT MYERS, FL. 33908 US L20000071928 FILED 8:00 AM March 04, 2020 Sec. Of State cmwood

Article V

The effective date for this Limited Liability Company shall be:

03/04/2020

Signature of member or an authorized representative

Electronic Signature: DEXTER PENARANDA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.