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Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
L S MANAGEMENT GROUP, LLC**

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

MAR 25 2020

T. SCOTT

M20000032055

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: *Ofust and with the words "Limited Liability Company, LLC," or "LLC"*

L S MANAGEMENT GROUP, LLC

ARTICLE II - Address:

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

943 NW 97 AVE # 103
MIAMI, FL 33172

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: *(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.)*

SOLIMAR VANESA GUILLENT ALFARO
943 NW 97 AVE # 103
MIAMI, FL 33172

ARTICLE IV-

The name and title of each person authorized to manage and control the Limited Liability Company:

SOLIMAR VANESA GUILLENT ALFARO (AMBR)
943 NW 97 AVE # 103 MIAMI, FL 33172

LEONARDO RAFAEL JAIMES BETANCOURT (AMBR)
943 NW 97 AVE # 103 MIAMI, FL 33172

2020 MAR 24 PM 2:09

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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 of this document 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.S.

SOLIMAR VANESA GUILLENT ALFARO

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 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)