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.

(((H20000102298 3)))



H200001022983ABCY

te: DO	Doing	so will generate anot	her cover sneet.		三芒的	
	. <u></u>	· · · · · · · · · · · · · · · · · · ·		12* 8 7.2 22.	<u></u>	<u> </u>
To:					35-	:
	Division of C	Corporations			25	70
	Fax Number	: (850)617-6381			S) III.	1_
From:					77)	ĊΛ
r i Oin.	Account Name		ATE FILING SERVICE,	INC.	: : : :	20
	Account Number	er : I200000000019			2	,
	Phone	: (305)552-5973				•
					-	
an	Fax Number		ss entity to be uso one email address p	ed for lease.	future	
an	Fax Number the email addrenal report mai	: (305)675-5944 ess for this busine	one email address p	ed for lease.	future	
an	Fax Number the email addrenal report mai	: (305)675-5944	JABILITY CO.	ed for lease.	<u></u>	<u> </u>
an	Fax Number the email addrenal report mai	: (305)675-5944 ess for this busine ilings. Enter only of the control of the con	JABILITY CO.	ed for lease.	<u></u>	<u> </u>
an	Fax Number the email address: ail Address: FLOR	: (305)675-5944 ess for this busine illings. Enter only of the control of the co	JABILITY CO.	ed for lease.	<u></u>	2020 APR -
an	Fax Number the email addrenual report mail address: FLOR	: (305)675-5944 ess for this busine illings. Enter only of the control of the co	JABILITY CO.	ed for lease.	<u></u>	<u> </u>

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

	SANBE	TALENT, LLC			
(Must conatin the	c words "Limited Lia	ability Company, "	L.L.C.," or "LLC.")		
RTICLE II - Address: The mailing address and street address	s of the principal offi	ice of the Limited I	Liability Company is:		
Principal Off	Hee Address:		Mailing Address:		
828 3RD ST APT PH3 MIAMI BEACH, FL 3313	10		RD ST MI BEACH, FL 33139		
	Duntetound Office &	Decistered Aven	t's Signature:		2
ARTICLE III - Registered Agent, R The Limited Liability Company cann mother business entity with an active	Registered Office, & not serve as its own He Florida registration ess of the registered to	Registered Agent. \\ Registered Agent. \\) agent are:	t's Signature: You must designate an individual or		2020 APR
RTICLE III - Registered Agent, R The Limited Liability Company cann nother business entity with an active	Registered Office, & not serve as its own He Florida registration ess of the registered to	Registered Agent. \(\)	t's Signature: You must designate an individual or		1
ARTICLE III - Registered Agent, R The Limited Liability Company cann mother business entity with an active	Registered Office, & not serve as its own He Florida registration ess of the registered to	Registered Agent. \\ Registered Agent. \\) agent are:	t's Signature: You must designate an individual or	1355 AF 1355	9-
ARTICLE III - Registered Agent, R The Limited Liability Company cann mother business entity with an active The name and the Florida street addre	Registered Office, & not serve as its own Rec Florida registration ess of the registered and ANTONI	Registered Agent. Your Registered Agent. You agent are: O SANTANA BE Name	t's Signature: 'ou must designate an individual or CARES		-6 PH
ARTICLE III - Registered Agent, R The Limited Liability Company cann mother business entity with an active The name and the Florida street addre	Registered Office, & not serve as its own Rec Florida registration ess of the registered a	Registered Agent. Your Registered Agent. You agent are: O SANTANA BE Name	t's Signature: 'ou must designate an individual or CARES		-6 PH 2:
ARTICLE III - Registered Agent, R (The Limited Liability Company cann another business entity with an active The name and the Florida street addre	Registered Office, & not serve as its own Rec Florida registration ess of the registered and ANTONI	Registered Agent. Your Registered Agent. You agent are: O SANTANA BE Name	t's Signature: 'ou must designate an individual or CARES		-6 PH

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 APR -6 PH 2: 49

ARTICLE IV-

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MCD	ANTONIO SANTANA BECARES
MGR	828 3RD ST APT PH3
	MIAMI BEACH, FL 33139
	·
	·
(Use attachment if necessary)	
and the state of t	we date of filing: 04/06/2020 (OP'TIONAL)
and the state of t	be date of filing: 04/06/2020 (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days
ICLEV: Effective date, if other than the effective date is listed, the date must	be specific and cannot be more than five business days prior to or 90 day
ICLE V: Effective date, if other than the effective date is listed, the date must ate of filing.) : If the date inserted in this block does	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be
CLEV: Effective date, if other than the effective date is listed, the date must ate of filing.) If the date inserted in this block does	be specific and cannot be more than five business days prior to or 90 days anot meet the applicable statutory filing requirements, this date will not be l
ICLE V: Effective date, if other than the effective date is listed, the date must ate of filing.) If the date inserted in this block does occument's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be
ICLE V: Effective date, if other than the effective date is listed, the date must ate of filing.) If the date inserted in this block does occurrent's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be
ICLEV: Effective date, if other than the effective date is listed, the date must	be specific and cannot be more than five business days prior to or 90 days anot meet the applicable statutory filing requirements, this date will not be l
ICLE V: Effective date, if other than the effective date is listed, the date must ate of filing.) If the date inserted in this block does occument's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 days anot meet the applicable statutory filing requirements, this date will not be l
ICLE V: Effective date, if other than the effective date is listed, the date must ate of filing.) : If the date inserted in this block does occument's effective date on the Departicle VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 days anot meet the applicable statutory filing requirements, this date will not be l
ICLE V: Effective date, if other than the effective date is listed, the date must ate of filing.) If the date inserted in this block does occurrent's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 days anot meet the applicable statutory filing requirements, this date will not be l
CLE V: Effective date, if other than the effective date is listed, the date must ate of filing.) : If the date inserted in this block does occument's effective date on the Departicle VI; Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 days anot meet the applicable statutory filing requirements, this date will not be l
ICLE V: Effective date, if other than the effective date is listed, the date must late of filing.) If the date inserted in this block does occument's effective date on the Departicle VI: Other provisions, if any. REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90 days a not meet the applicable statutory filing requirements, this date will not be I tment of State's records.
CLE V: Effective date, if other than the effective date is listed, the date must rate of filing.) If the date inserted in this block does occurrent's effective date on the Departicle VI: Other provisions, if any. REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90 days a not meet the applicable statutory filing requirements, this date will not be I tment of State's records.
ICLE V: Effective date, if other than the effective date is listed, the date must rate of filing.) If the date inserted in this block does occument's effective date on the Departicle VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is	s not meet the applicable statutory filing requirements, this date will not be I tment of State's records. of a member or an authorized representative of a member.
CLE V: Effective date, if other than the effective date is listed, the date must rate of filing.) If the date inserted in this block does ocument's effective date on the Departicle VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of this document is the provision of the department of the provision	s not meet the applicable statutory filing requirements, this date will not be I tment of State's records. of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes. ny false information submitted in a document to the Department of State
CLE V: Effective date, if other than the effective date is listed, the date must rate of filing.) If the date inserted in this block does occument's effective date on the Departicle VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of this document is the provision of the Department of	s not meet the applicable statutory filing requirements, this date will not be I tment of State's records. of a member or an authorized representative of a member. It executed in accordance with section 605.0203 (1) (b), Florida Statutes. It is expected in a document to the Department of State it degree felony as provided for in s.817.155, F.S.
ICLE V: Effective date, if other than the effective date is listed, the date must note of filing.) If the date inserted in this block does occument's effective date on the Departicle VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of the provision occurrent is document in the particle occurrent in the particle occ	s not meet the applicable statutory filing requirements, this date will not be I tment of State's records. of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes. ny false information submitted in a document to the Department of State