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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please.

Email Address:_

FLORIDA LIMITED LIABILITY CO. AZZURE PARTNERS, LLC.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

ARTICLES OF ORGANIZATION FOR

Azzure Partners, LLC.

A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name & EIN & Date of Organization:

The name of the Limited Liability Company is:

Azzure Partners, LLC.

The EIN of the Limited Liability Company is:

85 - 0529863

The date that the Limited Liability Company is organized is:

03 - 25 - 2020

ARTICLE II - Mailing & Physical Addresses:

The mailing address of the Limited Liability Company is:

P. O. Box 521850

Miami, Florida 33152

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

780 NE 69th Street, Suite 204

Miami, FL 33138

ARTICLE III - Registered Agent, Registered Office:

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

Hersol, Inc.

10476 Trianon Place

Wellington, FL 33449

ARTICLE IV- Management & Control:

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

Jeffrey Martinez-Malo
Ana Maria Gomez Sanpedro
Azzure Mar Seafood Products, LLC.
Managers, Members
780 NE 69th Street, Suite 204
Miami, FL 33138

Joseph Hernandez David M. Nguyen JDMR Seafood, LLC. Managers, Members P. O. Box 521850 Miami, FL 33152 2020 APR - 7 AM 6: 40
SCURETARY OF STATE
TAIL AHASSEE, FL

ARTICLE V - PURPOSE:

The purpose for which the company is organized is to conduct any and all lawful business allowed by the laws of the State of Florida and the United States of America.

Required Signatures:

Acuph M-S

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.

Joseph Hernandez

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..

Jensh M-g

Registered Agent's Signature (REQUIRED)

M 6: 40 F STATE