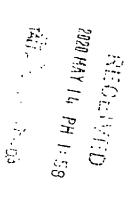
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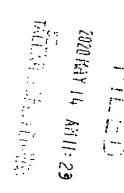
(Requestor's Name)
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- PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
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FILE 1st

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE :

AUTHORIZATION : Spelle le man

COST LIMIT :

ORDER DATE : May 13, 2020

ORDER TIME : 11:04 AM

ORDER NO. : 288865-015

CUSTOMER NO: 7289394

DOMESTIC FILING

NAME: TERCERO GROUP, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY _ PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson - EXT.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Lia	ability Company is:			
TERCERO GRO	DUP, LLC			
(Must	conatin the words "Limite	d Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stre				
	ncipal Office Address:		Mailing Address:	
7751 NW 27 AV		P.O.	BOX 143346	
MIAMI, FL 3314	17	COI	RAL GABLES, FL 33114	
	Albert V. Hanley, I	Name		
	7751 NW 27 AVEN		···· <u>·</u> ····	
	Florida street addre	ss (P.O. Box <u>NOT</u> ac	ceptable)	
	Miami	Florida	33147	
	City	State	Zip	
further agree to comply with the	e provisions of all statutes r obligations of my position Albert V. Hanley	volument as registere relating to the proper a as registered agent a	above stated limited liability compand agent and agree to act in this capaind complete performance of my dust provided for in Chapter 605, F.S	

(CONTINUED)

2020 MAY 14 AM11:29

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Albert V. Hanley, III 7751 NW 27 AVENUE Miami, Florida 33147
	
(Use attachment if necessary)	
CLE V: Effective date, if other than the date effective date is listed, the date must be space of filing.) If the date inserted in this block does not recument's effective date on the Department	ecific and cannot be more than five business days prior to or 90 day neet the applicable statutory filing requirements, this date will not be of State's records.
CLE V: Effective date, if other than the date effective date is listed, the date must be space of filing.) If the date inserted in this block does not recument's effective date on the Department	neet the applicable statutors (Slice and control of 90 day
CLE V: Effective date, if other than the date effective date is listed, the date must be sp te of filing.) If the date inserted in this block does not re-	neet the applicable statutors (Slice and control of 90 day
CLE V: Effective date, if other than the date effective date is listed, the date must be space of filing.) If the date inserted in this block does not recument's effective date on the Department CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me This document is executed a manuary false.	neet the applicable statutors (Slice and control of 90 day
CLE V: Effective date, if other than the date effective date is listed, the date must be space of filing.) If the date inserted in this block does not recument's effective date on the Department CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me This document is executed a manuary false.	meet the applicable statutory filing requirements, this date will not be of State's records. Imber or an authorized representative of a member. The dia accordance with section 605.0203 (1) (b), Florida Statutes. The information submitted in a document to the Department of State is felony as provided for in s.817.155, F.S.