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To:

Division of Corporations

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Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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FLORIDA LIMITED LIABILITY CO. STAR FLOORS LH, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – NAME THE NAME OF THE LIMITED LIABILITY COMPANY IS:

STAR FLOORS LH, LLC

(Must end with the words "Limited Liability Company, "L.L.C., or LLC.")

ARTICLE II - ADDRESS:

THE MAILING ADDRESS AND STREET ADDRESS OF THE PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

PRINCIPAL OFFICE ADDRESS:

MAILING ADDRESS

2720 NW 10TH AVE APT D MIAMI, FL. 33127

2720 NW 10TH AVE APT D MIAMI, FL. 33127

ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

(The Limited Liability Company cannot serve as it own Registered Agent. You must designate and Individual or another business entity with an active Florida registration)

The name and the Florida street address of the registered agent are: MARIA ELIZABETH HERNANDEZ	O AUG
Name 2720 NW 10 TH AVE APT D	RY (
Florida street address (P.O. Box NOT acceptable) MIAMI, FL. 33127	FLOGS:
City, State, and Zip.	DA DA

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 certificated, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision of all statutes relating to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (Requiered)

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as Follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

MARIA ELIZABETH HERNANDEZ

 $2720 \text{ NW } 10^{\text{TH}} \text{ AVE APT D}$

MIAMI, FL. 33127

MGR

RAFAEL LARA VELASQUEZ 2720 NW 10TH AVE APT D

MIAMI, FL. 33127

(Use attachment if necessary)

ARTICLE V: EFFECTIVE DATE, IF OTHER THAN THE DATE OF FILLING: 08/20/2020, (OPTIONAL) (IF AN EFFECTIVE DATE IS LISTED, THE DATE MUST BE SPECIFIC AND CANNOT BE MORE THAN FIVE BUSINESS DAYS PRIOR TO OR 90 DAYS AFTER THE DATE OF FILLING.)

REQUIRED SIGNATURE:

SIGNATURE OF A MEMBER OF A MUIHORIZED REPRESENTATIVE OF A MEMBER.

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein at true.)

MARIA ELIZABETH HERNANDEZ

Tyoed or printed name of signee

FILED 20 AUG 20 PH 6: 37 LURETANY OF STATE ALLAHASSEE, FLORIDA