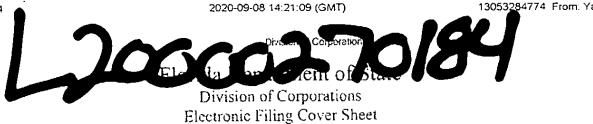
13053284774 From: Yanet Avila

9/8/2020



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.

(((H200003107903)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (859)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

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

| r: 1 | Address: | | |
|------|----------|--|--|
| | | | |
| | | | |

FLORIDA LIMITED LIABILITY CO. FTJ & CDV INVESTMENTS LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | l l |
| Page Count | 03 |
| Estimated Charge | \$155.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

D O'KEEF' SEP 0 9 2029 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FTJ & CDV INVESTMENTS LLC

(Must contain 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: |
|---------------------------|-------------------|
| 1163 NE 88 STREET | 1163 NE 88 STREET |
| MIAMI, FL. 33138 | MIAMI, FL. 33138 |
| Internal Car Society | |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (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.)

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

| CARLOS L. DEL V | ALLE | |
|-----------------------|----------------------------|------------|
| | Name | |
| 1163 NE 88 STREE | т | |
| Florida street addres | ss (P.O. Box <u>NOT</u> ac | cceptable) |
| MIAMI | FL | 33138 |
| City | State | Zip |

Having been named as registered agant and to accept service of process for the above stated limited liability company at the piace 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 registerful fight as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

20 SEP -8 PH 6: 27

| Ā | R | T | Į(| L) | Ε | Ī | ١ | _ |
|----|---|---|----|--------|---|---|----|---|
| л. | к | 1 | J١ | ,, | Ľ | 1 | ١. | - |

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

| <u>litte:</u> | Name and Address: | |
|--|--|---|
| "AMBR" = Anthorized Member | r | |
| "MGR" = Managet | | |
| AMBR | CARLOS L. DEL VALLE | |
| | 1163 NE 88 STREET | |
| | MIAML FL 33138 | |
| | | |
| 4.6.41312 | EDANGISCO T. IDIENTO | |
| AMBR | FRANCISCO T. JIMENEZ 1163 NE 88 STREET | S Tonig |
| | MIAMI, FL. 33138 | <u>≥</u> |
| | | <u>-0</u> |
| | | AS SE |
| | | |
| | | (S) = 1 |
| | | |
| | | (L) - (L) |
| | | |
| | | |
| | | |
| | | <u> </u> |
| | | ,s ~ |
| (If an effective date is listed, the date muthe date of filing.) | the date of filing: ist be specific and cannot be more than five busines oes not meet the applicable statutory filing requirement artment of State's records. | s days prior to or 90 days after |
| ARTICLE VI: Other provisions, if any, | | |
| | 14.0 | |
| REOURED SIGNATURE: | Mh. | |
| This document: I am aware that | of a member or an authorized representative of a is executed in accordance with section 605.0203 (1) of any false information submitted in a document to the didegree felony as provided for in \$.817.155, F.S. | (b), Florida Statutes. |
| CARLOS | S.L. DEL VALLE. Typed or printed name of signee | *************************************** |
| | | |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)