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## FLORIDA LIMITED LIABILITY CO. HORBO INVEST LLC

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¥	ARTICI ESOFORGAN	TATION FOR FLORIDA	LIMITED LIABILITY COP	- APANY	
ARTICLE I The name of	t - Name: The Limited Liability Comp	any is:			
HORBO	NVEST LLC				
<u></u>	(Must end with the	words "Limited Liability	Company, "L.L.C.," or	'LLC.")	
ARTICLE The mailing	II - Address: address and street address o	of the principal office of t	he Limited Liability Com	pany is:	
	Office Address:	Mail	ing Address:		
	82nd AVE	SAN	AF	······································	
UURAL, F	<u>L 33122</u>	<u></u>			
.(The Limite another bu	III - Registered Agent, Re ed Liability Company canno siness entity with an active I and the Florida street address <u>SERGIO A.FI</u>	t serve as its own Register Porida registration.) s of the registered agent a	red Agent. You must dest	gnate an individual of	
	1575 SW 871	TH AVE address (P.O. Box <u>NOT</u>	acceptable)		
			2017)		
	MIAMI	F City	Zip		,
the pla	een named as registered age ace designated in this certific y. I further agree to comply y dutles, and I am familtar with	ate. Thereby accept the af	tatutes relating to the prop ns of my position as regist	er and complete perfor	mance
		IXV			
	Regist	ered Agent's Signature (F	(EQUIRED)	$\overline{r}$ $\sim$	
				20 NOV	
		(CONTINUED)		- VO	:-
		Page 1 of 2		$\frac{1}{2}$	

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## ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" - Authorized Member "MGR" = Manager	JOSE L HORNA	
MGR	3045 NW 82nd AVE	
	DORAL FL 33122	
MGR	TATIANA BONANNI	u _ <u></u>
	3045 NW 82nd AVE	>> N
		ON NO
<u></u>		
		<u> </u>
(Use attachment if necessary)		

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_\_\_. (OFTIONAL) (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 filing.)

ARTICLE VI: Other provisions, if any.

**REQUIRED SIGNATURE:** 

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.)

> SERGIO A FLEITES CPA - REGISTERED AGENT Typed or printed name of signee

> > Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5:00 Certificate of Status (Optional)

Page 2 of 2