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Florida Department of State
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**FLORIDA LIMITED LIABILITY CO.
MAGALY INVESTMENTS LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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T. SCOTT

ARTICLES OF ORGANIZATION OF MAGALY INVESTMENTS LLC

ARTICLE I NAME

The name of the Limited Liability Company shall be:
MAGALY INVESTMENTS LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
6190 SW 114th St. Pinecrest FL 33156

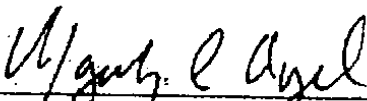
ARTICLE III PURPOSE

This company shall have perpetual existence and may engage in any and lawful business under the laws of the United States in the State of Florida.

ARTICLE IV REGISTERED AGENT

The name and Florida Street address of the initial registered agent is:
MAGALY VALDEZ 6190 SW 114th St. Pinecrest FL 33156

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 register agent as provided for in Chapter 605, F.S.



Registered Agent's Signature

ARTICLE VI MEMBERS


MAGALY VALDEZ - MANAGING MEMBER
6190 SW 114th St. Pinecrest FL 33156

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ARTICLE VII ORGANIZER

The name and address of the person signing these articles is:
MAGALY VALDEZ – MANAGING MEMBER
6190 SW 114th St. Pinecrest FL 33156

IN WITNESS WHEREOF, the undersigned member has executed these Articles of Organization, in compliance with Chapter 605 of the Florida Statutes, this 1st day of December of the year 2020.


MAGALY VALDEZ
Manager Member

CERTIFICATION

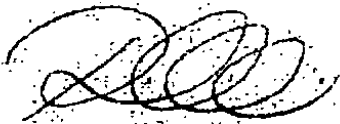
STATE OF FLORIDA

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COUNTY OF DADE

*BEFORE ME, A Notary Public authorized to take acknowledgements in the state and county set forth above, personally appeared **MAGALY VALDEZ** to me and known by me to be the person who executed the foregoing Articles of Organization,*

IN WITNESS WHEREOF, I have hereunder set my hand and affixed my official seal, in this state and county aforesaid on this 1st Day of December of the year 2020.



NOTARY PUBLIC

My Commission expires: May 28, 2024

