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Division of Corporations 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 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** FLORIDA LIMITED LIABILITY CO.	Division of Corporations 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 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** ; FLORIDA LIMITED LIABILITY CO. MEDLEY PROPERTY, LLC.							
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ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY **OF** MEDLEY PROPERTY, LLC.

ARTICLE I - Name

The name of the Limited Liability Company is:

MEDLEY PROPERTY, LLC.

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

12690 NW SOUTH RIVER DR **MEDLEY, FL 33178**

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

ROSANA GONZALEZ 12850 WEST STATE RD 84 LOT 1-12 DAVIE, FL 33325

Having been named as registered agent and to accept service of process for the above 1.7 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 familiar with and accept the obligations of menosition as registered agent as provided for in Chapter 605, F.S.

ent's Signature

ARTICLE IV – Management (Check box if applicable)

(x) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Rosana Gonzalez AMBR 100 % Stocks 12850 West State Rd Lot 1-12 Divie

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(In accordance with section 605.020(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

IN WITNESS WHEREOF, the undersigned has hereunto set their hands and seul this January 8, 2021, at Miami, FL US.



STATE OF FLORIDA **COUNTY OF DADE**

Sworn and subscribed before me, this 21st of January of 2021, at Miami, Fl by Mrs.

Rosana Gonzalez, who presented her FL Driver License No. G626-160-76-913-0 as identification. **Commission** Expires: au Notary Public - State of Florida