2/26/2021

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2021-02-26 14:16:59 GMT

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From: Yanet Avila

rida Department or

Division of Corporations Electronic Filing Cover Sheet

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FLORIDA LIMITED LIABILITY CO. JABBIONETA LLC

J. FASON MAR 0 1 2021

Certificate of Status	0
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Page Count	03
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ARTICLES OF ORGANIZATION FOR ELORIDA LIMITED HABILITY COMPANY

RTICLE 3 - Name: The name of the Limited Liability Company is:	
JABBIONETA LLC	
(Must contain the words "Limited Liability C	Company, "L.L.C.," or "LLC.")
RTICLE II - Address:	
ARTICLE II - Address: The mailing address and street address of the principal office of the Principal Office Address:	
The mailing address and street address of the principal office of the	e Limited Liability Company is: <u>Mailing Address:</u>
The mailing address and street address of the principal office of the <u>Principal Office Address</u> :	

(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.)

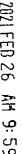
The name and the Florida street address of the registered agent are:

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BRAMASOLE SERV	TCES L.L.C.	
	Name	
13499 BISCAYNE B	LVD OFFICE CU-	-T3
Florida street address	(P.O. Box NOT a	cceptable)
NORTH MIAMI	FL	33181
City	State	Zip

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

Jorge Eduardo Rapacholi
Registered Agent's Signature (REQUIRED)
(CONTINUED)



AMBR AMBR	ORGE EDUARDO RAPACHOLI 13499 BISCAYNE BLVD OFFICE CU-T3 NORTH MIAMI, FL 33181 CECILIA ESTHER RAPACHOLI 13499 BISCAYNE BLVD OFFICE CU-T3 NORTH MIAMI, FL 33181
	13499 BISCAYNE BLVD OFFICE CU-T3 NORTH MIAMIL FL 33181
AMBR	
	MARCELA ANGELICA RAPACHOLI 13499 BISCAYNE BLVD OFFICE CU-13 NORTH MIAMI, FL 33181
Use attachment if necessary) V: Effective date, if other than the date of the date is listed, the date must be specified.	of filing: (OPTIONAL) tific and cannot be more than five business days prior to or 90 d
f filing.)	eet the applicable statutory filing requirements, this date will not b
CVI: Other provisions, if any.	
EVI: Other provisions, if any. REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	Jorge Eduardo Rapacholí
Signature of a mer This document is execute I am aware that any false	Jorge Eduardo Rapacholí nber or an authorized representative of a member. Id in accordance with section 605.0203 (1) (b), Floride Statutes. Information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
Signature of a mer This document is execute I am aware that any false	other or an authorized representative of a member. Id in accordance with section 605.0203 (1) (b), Floride Statutes, information submitted in a document to the Department of State felony as provided for in \$.817.155, F.S.