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| (Requestor's Name)                      |
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NAME: CASAGIO LLC

TYPE OF FILING: ARTICLES

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

| <u>CASAGIO LI</u>  | ******  |  |   |  |
|--|---|--|---|--|
| (Mu  | st contain the words "Limited Li  | ability Company,   | "L.L.C.," or "LLC.")                                  |  |
| RTICLE II - Address:   |   |  |   |  |
| ne mailing address and s   | treet address of the principal offi   | ce of the Limited  | Liability Company is:                                 |  |
| <u> P</u>  | rincipal Office Address:  |  | Mailing Address:                                      |  |
| 111 E Washington St  |   | 111  | 111 E Washington St                                   |  |
|  |   |  | Apt 2714  |  |
| Apt 2714   |   |  |   |  |
| Apt 2714 Orlando, FL 3  RTICLE III - Register The Limited Liability Conother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration.  | Orla  Registered Age egistered Agent.                                    | ando, FL 32801  |  |
| Apt 2714 Orlando, FL 3 ARTICLE III - Register The Limited Liability Conother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration.  street address of the registered a  | Orla Registered Age egistered Agent. ) gent are:                         | nt's Signature: You must designate an individual or ; |  |
| Apt 2714 Orlando, FL 3 ARTICLE III - Register The Limited Liability Conother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration.  street address of the registered a  C & J Accounting and                    | Orla Registered Age egistered Agent. ) gent are:                         | nt's Signature: You must designate an individual or ; |  |
| Apt 2714 Orlando, FL 3 ARTICLE III - Register The Limited Liability Conother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration.  street address of the registered a  C & J Accounting and                    | Orla  Registered Age egistered Agent. )  gent are:  Tax Services, Inc.   | nt's Signature: You must designate an individual or ; |  |
| Apt 2714 Orlando, FL 3 ARTICLE III - Register The Limited Liability Conother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration.  street address of the registered a  C & J Accounting and                    | Orla Registered Age egistered Agent. ) gent are: Tax Services, Inc. Name | nt's Signature: You must designate an individual or ; |  |
| Apt 2714 Orlando, FL 3 ARTICLE III - Register The Limited Liability Conother business entity w | ed Agent, Registered Office, & mpany cannot serve as its own R ith an active Florida registration.  street address of the registered a  C & J Accounting and  1412 SW 147th Ave | Orla Registered Age egistered Agent. ) gent are: Tax Services, Inc. Name | nt's Signature: You must designate an individual or ; |  |

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..

Carolina Sas inha (Mar 31, 2021 12:03 EDT)

Registered Agent's Signature (REQUIRED)

(CONTINUED)

## ARTICLE IV-

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

| <u>Title:</u> "AMBR" = 7   | Authorized Member  | Name and Address:  |
|--|--|--|
| "MGR" = M<br>AMBR  | anager<br>   | Rafael Adolfo Quintana Pinto Salinas  111 E Washington St Apt 2714  Orlando, FL 32801  |
| AMBR   |  | Georgios Agrapidaki Graziani 111 E Washington St Apt 2714 Orlando, FL 32801  |
|  |  |  |
|  |  |  |
| ARTICLE V: Effective fate is the date of filing.) Note: If the date inse | listed, the date must be specific a<br>rted in this block does not meet th<br>ive date on the Department of Stat | ng: (OPTIONAL)  and cannot be more than five business days prior to or 90 days after  the applicable statutory filing requirements, this date will not be listed as te's records.                        |
| REOUIREL   | SIGNATURE:   | AFFERM (Mar 17. 3721 Lt 57131)   |
|  | This document is executed in a 1 am aware that any false inform  | or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes, mation submitted in a document to the Department of State by as provided for in s.817.155, F.S. |

Rafael Quintana

Typed or printed name of signee