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Certified Copies		Certificate	es of Status
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Account#: 120000000088

Date:05	/20/2021		
	Chris Vick		
Reference #:	1376248		
Entity Name:	ENPI IN	IVESTMENTS, LLC	
		tion to Transact Business	
Amendm	ent		
Change of	of Agent		
Reinstate	ment		
Conversi	on		
☐ Merger			ال
Dissolution	on/Withdrawal		
Fictitious	Name		
Other	, , , , , , , , , , , , , , , , , , ,		· · · · · ·
Authorized Amo Signature:	unt \$125.00		

F: 800.944.6607

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Account#: 120000000088

Date:	05/20/2021	
	Chris Vick	
Reference #		
Entity Name	ENPIIN	VESTMENTS, LLC
✓ Article	es of Incorporation/Authoriza	ion to Transact Business
Amen Amen	dment	
Chan	ge of Agent	
Reins	tatement	
Convi	ersion	
☐ Merge	er	
Disso	lution/Withdrawal	
☐ Fictition	ous Name	
Other		
Authorized A	smount \$125.00	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liabilit	y Company is:		
ENPI Investments, I. (Must cont	LC ain the words "Limited	Liability Com	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street a	ddress of the principal of	office of the Li	mited Liability Company is:
Princip	al Office Address:		Mailing Address:
789 Crandon Blvd. #1203 Kev Biscavne, FL 33	149		1 Alhambra Plaza Suite 1410 Coral Gables, FL 33134
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an	cannot serve as its own	n Registered A	Agent's Signature: gent. You must designate an individual or
The name and the Florida street	address of the registere	d agent are:	
	Somerset Corporate	Services, Inc.	
		Name	
	1 Alhambra Plaza S	uite 1410	
	Florida street addre	ss (P.O. Box N	OT acceptable)
	Coral Gables	Fl.	33134
	City	State	Zip
place designated in this certificate further agree to comply with the pr	I hereby accept the apportions of all statutes digations of my position	pointment as re relating to the p as registered a	for the above stated limited liability company at the gistered agent and agree to act in this capacity. I proper and complete performance of my duties, and I agent as provided for in Chapter 605, F.S
		(CONTINU	JED)

AMBR" = Authorized Member MGR" = Manager MGR MGR	Gerard Stewart Engler 789 Crandon Blvd. #1203 Kev Biscavne. FL 33149
<u>MGR</u>	789 Crandon Blvd. #1203
	789 Crandon Blvd. #1203
MCD	Kev Biscavne, FL 33149
MCD	
MCb	
	Monica Pietri
NICIN	789 Crandon Blyd. #1203
	Key Biscavne, FL 33149
	
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filling.) the date inserted in this block does not be detective date on the Department's effective date on the Department.	ot meet the applicable statutory filing requirements, this date will not b
f filing.) he date inserted in this block does n	specific and cannot be more than five business days prior to or 90 depot meet the applicable statutory filing requirements, this date will not be ent of State's records.
filing.) the date inserted in this block does not nearly effective date on the Department's effective date on the Department's Other provisions, if any. REQUIRED SIGNATURE:	ot meet the applicable statutory filing requirements, this date will not be ent of State's records.
filing.) the date inserted in this block does not the department is effective date on the Department is executive. EVI: Other provisions, if any. Signature of a This document is executed and aware that any forms.	ot meet the applicable statutory filing requirements, this date will not b

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

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)