

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210002478243)))



H210002478243ABC/

	Doing so will generate another cover sheet.	<u> </u>	
·		<u></u>	
To:		- EE.	
	Division of Corporations		
	Fax Number : (850)617-6381	Ĕ.	
		-	
From:		, , , , , ,	
	Account Name : BUSINESS FILINGS	(T):	
	Account Number : 105256001620	- €3;:.	
	Phone : (508)827-5300 Fax Number : (608)827-5501	<u>'</u> حسن	
	the email address for this business entity to be used for fut nual report mailings. Enter only one email address please.**	ure	
anı		cure	
anı	nual report mailings. Enter only one email address please.**	cure	
anı	nual report mailings. Enter only one email address please.**	cure	
anı	nual report mailings. Enter only one email address please.** ail Address:	cure	
anı	FLORIDA LIMITED LIABILITY CO. ADD 55 Solutions LLC	ture	
anı	FLORIDA LIMITED LIABILITY CO.	ure	

Electronic Filing Menu

Page Count

Estimated Charge

Corporate Filing Menu

Help

03

\$125.00

D O'KEEFE JUN 2 0 2021 To: 18506176381

FAX AUDIT # H21000247824 3

ARTICLES OF ORGANIZATION OF ADD 55 Solutions LLC

ARTICLE I

NAME

The name of the limited liability company is: ADD 55 Solutions LLC

ARTICLE II

ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be: 848 Brickell Ave Suite 203, Miami, Florida 33131.

ARTICLE HI INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: BP Tax Advisory LLC, 848 Brickell Ave Suite 203, Miami, Florida 33131. Located in the County of Miami-dade.

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 accept the obligations of my position as registered agent as provided for in Chapter 605. Tests.

Signature:

BP Tas Advisory LLC Mr. Gustavo Havranek, Manager Date: 06/24/2021

ARTICLE IV MANAGERS/MEMBERS

The management of the limited liability company is reserved for the managers and the names and addresses of the managers of the Limited Liability Company are:
Simone Pires Jordao, 848 Brickell Ave Suite 203, Miami, Florida 33131
Alessandra Pereira Marcelino, 848 Brickell Ave Suite 203, Miami, Florida 33131

	H21000247824 3
FAX AUDIT#	

Date: 06/24/2021

H21000247824 3 FAX AUDIT#

ARTICLE V

DURATION

The duration for the limited liability company shall be: Perpetual.

BP Tax Advisory LLC, Organizer

Mr. Gustavo Havranek, Manager Authorized Representative

(In accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

FAX AUDIT#

H21000247824 3