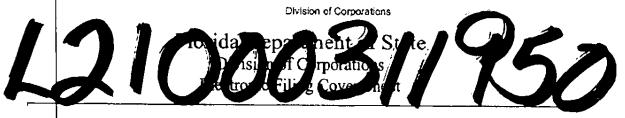
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## FLORIDA LIMITED LIABILITY CO. NAMA INVESTMENTS LLC

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TICLE				
ITICLE I - Name:				
e name of the Limited Lia	bility Company is:		٦	
NAMA INVEST	MENTS LLC			
(Must o	contain the words "Limited	Liability Company	"L.L.C.," or "LLC.")	<del> </del>
TICLE II - Address:				
	et address of the principal	office of the Limited	Liability Company is:	
j.	cipal Office Address:		Mailing Address:	
5866 NW 113 PL		586	6 NW 113 PL	
DORAL, FL 331	78		RAL, FL 33178	
and the Fiores Str		d agent are:		
tamic and pic Florida Stre	HENRY COLINA 5866 NW 113 PL	Name		
name and the Florida stre	HENRY COLINA	Name	xeptable)	
am pre Fiorita stre	HENRY COLINA  5866 NW 113 PL Florida street addres DORAL	Name	∝eptable)	
	5866 NW 113 PL Florida street address DORAL City	Name ss (P.O. Box <u>NOT</u> a FL State	•	

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE

Title:   AMBR" = Authorized Member   MGR" = Manager	Name and Address:
MGR	HENRY COLINA 5866 NW 113 PL DORAL, FL 33178
MGR	HERNANDO SANTACOLOMA 151 SE 15TH RD APT 201 MIAMI, FL 33129
(Use attachment if necessary)	
CLEV: Effective data if all ask ask ask	
te of filing.)	te of filing: JULY 02, 2021 . (OPTIONAL) specific and cannot be more than five business days prior to or 90 days.
te of filing.)	specific and connot be more than five business days prior to or 90 days.  Indeet the applicable statutory filing requirements, this date will not be lie
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the offiting.)  If the date inserted in this block does not comment's effective date on the Department.  CLE VI: Other provisions, if any.  INITS OF THE LLC MEMBERS WILL.  HERNANDO SANTACOLOMA 10 UNI  REQUIRED SIGNATURE:  Signature of a minute of the comment is executed in a ware that any false.	ember or an authorized representative of a member.

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SECRETARY OF STATE
TAIL AND SECRETARY OF STATE