

7/21/2021

Division of Corporations

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : ANTONIO ALONSO, PLLC.  
Account Number : I20160000045  
Phone : (305)606-0399  
Fax Number : (305)508-6364

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: alonsoa@aapalaw.com

**FLORIDA LIMITED LIABILITY CO.  
LELJ, LLC.**

Certificate of Status	1
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**SB**  
**7-22-21**

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**ARTICLES OF ORGANIZATION OF  
LELJ, LLC.**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I-Name:**

The name of the Limited Liability Company is:

**LELJ, LLC.**

**ARTICLE II-Address:**

The initial mailing address and street address of the principal office of the Limited Liability Company is:

2000 Island Blvd., #1108  
Aventura, FL 33160

**ARTICLE III-Registered Agent and Registered Office**

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


ANTONIO ALONSO LLC  
121 Alhambra Plaza, Suite 1500  
Coral Gables, FL 33134

**ARTICLE IV – Managers**

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

<u>Title</u>	<u>Name and Address</u>
Manager	Salomon Saba 2000 Island Blvd., #1108 Aventura, FL 33160

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledge them to be my act this 21 day of July, 2021.


  
\_\_\_\_\_  
Salomon Saba (Jul 21, 2021 10:23 CDT)

Name: Salomon Saba

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SECRETARY OF  
TALLAHASSEE COUNTY

1121000278498.3

(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 Section 817.155, F.S.)

  
Salomon Saba (Jul 21, 2021 10:23 CDT)

Name: Salomon Saba

**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT**

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 605, Florida Statutes.

(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 Section 817.155, F.S.)

Signature of Registered Agent

ANTONIO ALONSO LLC, a Florida  
professional limited liability companyBy:   
ANTONIO ALONSO, its Manager

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21 JUL 21 AM 10:19  
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TALLAHASSEE, FL