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**FLORIDA LIMITED LIABILITY CO.  
SUSPIRO INTERNATIONAL, LLC.**

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I: NAME

The name of the Limited Liability Company is:

**SUSPIRO INTERNATIONAL, LLC.**

### ARTICLE II: ADDRESS

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

**2496 Orchid Bay Dr.  
Naples, FL 34109**

The mailing address of the Limited Liability Company is:

**2496 Orchid Bay Dr.  
Naples, FL 34109**

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### ARTICLE III: PURPOSE

The purpose for which this Limited Liability Company is organized is:

**ANY AND ALL LAWFUL BUSINESS**

### ARTICLE VI: REGISTERED OFFICE AND AGENT

The name and the Florida street address of the Registered Office and Agent are:

**STEVEN HACKETT  
2496 Orchid Bay Dr.  
Naples, FL 34109**

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 and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.



**STEVEN HACKETT**

Registered Agent's Signature

**ARTICLE IV: MANAGER(S) OR MANAGING MEMBER(S)**

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

Title: MGRM

**PEDRO FERNANDO FAVARONY URREA**  
2496 Orchid Bay Dr.  
Naples, FL 34109

Title: MGRM

**MARIA VALENTINA FAVARONY JARAMILLO**  
2496 Orchid Bay Dr.  
Naples, FL 34109

Title: MGRM

**MARIANA FAVARONY AVILA**  
2496 Orchid Bay Dr.  
Naples, FL 34109

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**ARTICLE V: EFFECTIVE DATE**

The effective date for this Limited Liability Company shall be:  
**July 19, 2021**

REQUIRED SIGNATURE:

DocuSigned by:



ETYPES/SW/EBITE

Signature of a Member or an Authorized representative of a Member  
**MARIA VALENTINA FAVARONY JARAMILLO, MGRM**

I am the member or authorized representative submitting these Articles of Organization and affirm 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. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.