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

From:
        Account Name   : FANJUL ENTERPRISES LLC
        Account Number : I20190000080
        Phone   : (305)603-8791
        Fax Number   : (877)503-6086

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

        Email Address:_____

FLORIDA LIMITED LIABILITY CO.
JF TECH LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

JF TECH LLC
_____

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: **Mailing Address:**

4000 TOWERSIDE TER APT 1104   4000 TOWERSIDE TER APT 1104

MIAMI, FL 33138   MIAMI, FL 33138

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

NANCI PEREZ GUERRERO
_____
Name

4000 TOWERSIDE TER APT 1104
_____
Florida street address (P.O. Box **NOT** acceptable)

MIAMI   FL   33138
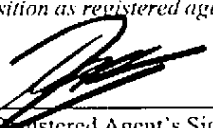City   State   Zip

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..

X _____

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title:
"AMBR" = Authorized Member
"MGR" = Manager

Name and Address:

MGR   NANCI PEREZ GUERRERO
             4000 TOWERSIDE TER APT 1104
             MIAMI, FL 33138

MGR   GABRIEL FERNANDO ROMASZKIEWICZ
             260 SUNRISE DRIVE # H
             KEY BISCAYNE, FL 33140

MGR   GABRIELA PISTO
             4000 TOWERSIDE TER APT 1104
             MIAMI, FL 33138

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ . (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.
NANCI PEREZ GUERRERO OWNS 25% OF THE LLC
GABRIEL FERNANDO ROMASZKIEWICZ OWNS 50% OF THE LLC
GABRIELA PISTO OWNS 25% OF THE LLC

REQUIRED SIGNATURE:

X _____
Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

NANCI PEREZ GUERRERO
Typed or printed name of signee

Filing Fees:
$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)