

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L21000437260
FILED 8:00 AM
October 06, 2021
Sec. Of State
tscott**

Article I

The name of the Limited Liability Company is:

CASAS MIAMI LLC

Article II

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

2301 COLLINS AV
1011
MIAMI BEACH, FL. 33139

The mailing address of the Limited Liability Company is:

2301 COLLINS AV
1011
MIAMI BEACH, FL. 33139

Article III

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

JULIA S ECHEVARRIA
2301 COLLINS AV
1011
MIAMI BEACH, FL. 33139

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.

Registered Agent Signature: JULIA S ECHEVARRIA

Article IV

The effective date for this Limited Liability Company shall be:

10/06/2021

Signature of member or an authorized representative

Electronic Signature: JULIA S ECHEVARRIA

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 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 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

L21000437260

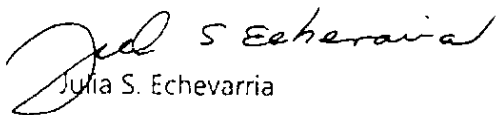
Miami, September the 30th 2021

Department of State

Tallahase FL

My name is Julia Echevarria, and I am writing to request a new filling for the Corporation Casas Miami LLC with document number L15000172154. I here declare that I am the owner of the company, and I would like to start a new business with the same name and will continued to be the owner also. I already submitted the payment, and proof of payment is attached to this letter.

Thank you in advance for your attention


Julia S. Echevarria

Phone number: 1 (813) 4940913

Address: 2301 Collins av 1011Miami Beach FL 33139

Clear/Reset

WELLS
FARGO

Acknowledgment by Individual

State of Florida

County of Miami-Dade

The foregoing instrument was acknowledged before me this 5th day
of October, 20 21, by means of ☒ physical presence or ☐ online notarization

Julia S Echevarria (name of person acknowledging).

- ☐ Personally known to me
☒ Produced Identification

Type of Identification Produced FL Driver License

Notary signature Anwar Almond

Notary name (typed or printed) Anwar Almond

Title (e.g., Notary Public) Notary Public

Place Seal Here

Anwar Almond
Notary Public
State of Florida
My Commission Expires 09/09/2022
Commission No. GG 256501

For Bank Purposes Only Description of Attached Document

Type or Title of Document

Request to file for Corp

Document Date

10/05/2021

Number of Pages

Signer(s) Other Than Named Above

Account Number (if applicable)