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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ANTONIO ALONSO, PLLC.

Account Number : 120160000045 Phone : (305)606-0399 Fax Number : (305)508-6364

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Email Address:\_\_\_\_salosabak@gmail.com\_

# FLORIDA LIMITED LIABILITY CO. SAGASA, LLC.

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To: +18506176381 Page: 2 of 3 2021-10-18 18:55:51 GMT 13055086364 From: Antonio Alonso, Esq.

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## ARTICLES OF ORGANIZATION OF SAGASA, LLC.

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

that:

### ARTICLE 1-Name:

The name of the Limited Liability Company is:

## SAGASA, LLC.

#### ARTICLE II - Address:

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

1000 Island Blvd., #1704 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>	Name and Address
Manager	Salomon Saba Kably 1000 Island Blvd., #1704 Aventura, FL 33160
Manager	Gabriel Saba Kably 1000 Island Blvd., #1704 Aventura, FL 33160

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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 <u>12</u> day of October, 2021.

Salomon 9aba (Oct 12, 2921 18:34 EDT)

Name: Salomon Saba

(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. 1 2 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 9aba (Oct 12, 2021 15;34 EDT)

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 company

By: ANTONIO ALONSO, its Manager