

12/9/21 4:06 PM

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 : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

****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.**Qualifix, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION

Article I. Name

The name of this Florida limited liability company is:
Qualifix, LLC

Article II. Address

The street address of the Company's initial principal office is:
Qualifix, LLC
ClaimCred - 153 E Flagler St. #122
Miami FL 33131

The mailing address of the Company's initial principal office is:
Qualifix, LLC
ClaimCred - 153 E Flagler St. #122
Miami FL 33131

Article III. Registered Agent

The name and street address of the Company's registered agent is:
Worldwide Corporate Administrators LLC
2330 Ponce De Leon Blvd
Coral Gables FL 33134

Article IV. Transferability of Membership Interests

No members shall have the right to assign their membership interests in the Company without the written agreement of all of the membership interests, unless otherwise provided in the Company's Operating Agreement. If the assignment is not approved by all of the membership interests, the assignee shall have no right to become a member, to participate in the management of the Company, or to exercise any other rights or powers of a member. The assignee shall merely be entitled to receive the share of profits and other distributions and the allocation of income, gain, loss deduction, credit or similar item to which the assignor was entitled, to the extent assigned.

Computershare Governance Services Inc.
d/b/a Corporate Creations International
801 US Highway 1
North Palm Beach FL 33408
(561) 694-8107

2021 DEC -9 AM 4:39
FALL 2021
STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF PALM BEACH

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Article V. Distribution of Profits

Unless otherwise provided in the Company's Operating Agreement, there shall not be any distribution of profits unless each separate distribution is approved by the affirmative vote of members who own more than 50% of the voting interest in the Company. The voting members shall have complete discretion on when and if to approve any distribution of profits.

Article VI. Management

This will be a manager-managed company. The name and address of each manager is:

Luis Carlos Pascual
ClaimCred - 153 E Flagler St. #122
Miami FL 33131
Mauricio Frizzarin
ClaimCred - 153 E Flagler St. #122
Miami FL 33131

Article VII. Company Existence

The Company's existence shall begin effective as of December 9, 2021.

The undersigned authorized representative of a member executed these Articles of Organization on 12/9/2021.



COMPUTERSHARE GOVERNANCE SERVICES INC.
D/B/A CORPORATE CREATIONS INTERNATIONAL

Michael Reinhold Vice President
Kevin Duteau, Attorney-in-Fact

Computershare Governance Services Inc.
d/b/a Corporate Creations International
801 US Highway 1
North Palm Beach FL 33408
(561) 694-8107

2021 DEC -9 AM 1:39
SECRETARY
TALLAHASSEE, FL

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STATEMENT OF REGISTERED AGENT

LIMITED LIABILITY COMPANY:

Qualifix, LLC

REGISTERED AGENT/OFFICE:

Worldwide Corporate Administrators LLC

2330 Ponce De Leon Blvd

Coral Gables FL 33134

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.



WORLDWIDE CORPORATE ADMINISTRATORS LLC

Kevin Duteau, Attorney-in-Fact

Date: December 9, 2021.

2021 DEC -9 AM 4:39
SECRETARY
TALLA 11-2-2021

Computershare Governance Services Inc.
d/b/a Corporate Creations International
801 US Highway 1
North Palm Beach FL 33408
(561) 694-8107

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

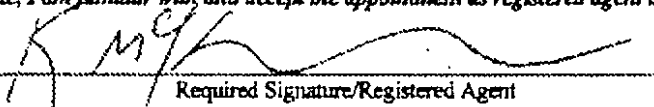
ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: KEVIN MCKIERNANAddress: 317 BAYSHORE DRIVEVENICE, FL 34285**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: KEVIN MCKIERNANAddress: 317 BAYSHORE DRIVEVENICE, FL 34285**ARTICLE VIII EFFECTIVE DATE:**

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 days prior or 90 days after the 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.

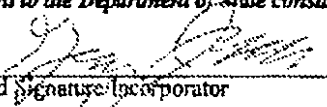
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent12/03/2021

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted to a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator12/3/2021
Date2021 DEC -9 AM 4:39
SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 12/10/21 BY 60322