Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		TLLA SECR	2021 DE	
10.	Division of Corporations	⊞ .™	(3	
	Fax Number : (859)617-6381	TAN Y ASSE	20	-
From:		<u>(</u> _ ا	<u> </u>	[]
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.		120	-
	Account Number : I20000000019	- S	ۻ	C
	Phone : (305)552-5973	₽	Ċī	
	Fax Number : (305)675-5944	F STATE	င်း	
**Ente	er the email address for this business entity to be used for	firtuna		
	annual report mailings. Enter only one email address please.	**		

FLORIDA LIMITED LIABILITY CO. EIGHTY EIGHT MANAGEMENT LLC

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

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ARTICLES OF ORGANI	ZATION		PEC	
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Effective Date	11122 §		AM 9: 53	
of the Limited Links		≓' ''	w	

ARTICLE

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company,

Eighty Eight MANAGEMENT LLC

ARTICLE II - Address:

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

8500 S.W. 133 AVE ROAD #309 miami , FC 33183

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (Th: Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

SUNANTA CHEEVAPRAVATNGAM 8500 S.W. 133 AVE ROAD #309 miami, Fc 33183

ARTICLE IV-

The name and title of each person authorized to manage and control the Limited Liability Company: (AMBR OR MGR)

> SUNANTA Cheevapravatingam (AMBR)

Required Signatures:		
AHASS 0	DEC 20	
Signature of a members	A	m
Signature of a member or an authorized representative of a member	5	

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 s.817.155, F.S.

SUNANTA Cheevapravat ngam
Typed or printed name of signer

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: a provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)