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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : SALOMON B. ESQUENAZI, P.A.

Account Number : I20130000020 Phone : (954)989-4995 Fax Number : (954)989-4991

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

Email Address:

corporate@esquenazi-law.com

FLORIDA LIMITED LIABILITY CO.

Vaya Enterprises, LLC

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From: MARIA LEDESMA Fax: 19549894991 To: Fax: (850) 617-6381 Page: 3 of 4 02/10/2022 12:13 PM

Audit No.: H22000053727 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. Name

The name of the Limited Liability Company is:

Vaya Enterprises, LLC

ARTICLE II. - Addresses

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

1801 NE 123rd Street Suite 313 North Miami, FL 33181

ARTICLE III. – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Corporate Solutions of South Florida, Inc.

4651 Sheridan Street, Suite 355, Hollywood, Florida 33021

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, we hereby accept the appointment as registered agent and agree to act in this capacity. We further agree to comply with the provisions of all statutes relating to the proper and complete performance of our duties, and we are familiar with and accept the obligations of our position as registered agent as provided for in Chapter 605, F.S.

Corporate Solutions of South Florida, Inc.

Salomon B. Esquenazi, resident

Audit No: H22000053727 3 This instrument was prepared by: Salomon B. Esquenazi, P.A. 4651 Sheridan Street, Suite 355 Hollywood, Florida 33021 (954) 989-4995 Audit No. H22000053727 3

To:

ARTICLE IV. - Management

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The names and addresses of the managers who are to serve as initial managers are:

> Gilinski, Abraham 1801 NE 123rd Street Suite 313

North Miami, FL 33181

Gilinski, Victor Haim

1801 NE 123rd Street Suite 313

North Miami, FL 33181

Gilinski, Schay Ariel

1801 NE 123rd Street Suite 313

North Miami, FL 33181

Print Name: Abraham Gilinski Signature of a member or authorized representative of a member. 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.)

4870-5586-9965, v. 1

Audit No: H22000053727 3 This instrument was prepared by: Salomon B. Esquenazi, P.A. 4651 Sheridan Street, Suite 355 Hollywood, Florida 33021 (954) 989-4995