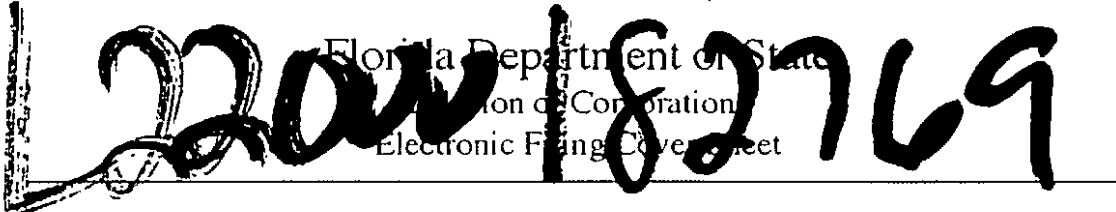


5/2/22, 5:07 PM

Division of Corporations



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.

((H22000159151 3)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
 Fax Number : (850)617-6381

From: Account Name : LEGALINC CORPORATE SERVICES INC.
 Account Number : I20180000011
 Phone : (844)386-0178
 Fax Number : (214)317-4754

2022 MAY 02 07:58 AM

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.
Reef Midtown LLC

RECEIVED
2022 MAY -3 AM 12:02
CORPORATIONS
SUPPLY COMMERCIAL
SERVICES

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

T. SCOTT
MAY - 4 2022

(((H22000159151 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Reef Midtown LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

150 SE 2nd Ave., Suite 800
Miami, FL 33131

150 SE 2nd Ave., Suite 800
Miami, FL 33131

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

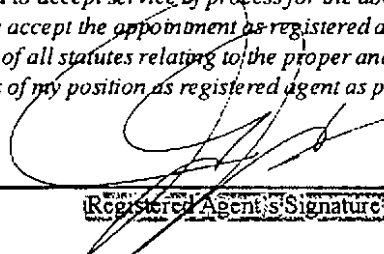
The name and the Florida street address of the registered agent are:

Paulo Melo
Name

150 SE 2nd Ave., Suite 800
Florida street address (P.O. Box NOT acceptable)

Miami FL 33131
City State Zip

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 as provided for in Chapter 605, F.S.



(Registered Agent's Signature (REQUIRED))

(CONTINUED)

22 MAY 2022 10:00 AM
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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	<u>Name and Address:</u>
AMBR - Authorized Member	
MGR - Manager	
<u>MGR</u>	<u>Paulo Melo</u> <u>150 SE 2nd Ave., Suite 800</u> <u>Miami, FL 33131</u>
<u>MGR</u>	<u>Roberto Melo</u> <u>150 SE 2nd Ave., Suite 800</u> <u>Miami, FL 33131</u>
<u>MGR</u>	<u>Vinicio Tavares</u> <u>150 SE 2nd Ave., Suite 800</u> <u>Miami, FL 33131</u>
<u>MGR</u>	<u>Victor Cavalcanti</u> <u>150 SE 2nd Ave., Suite 800</u> <u>Miami, FL 33131</u>

(Use attachment if necessary)

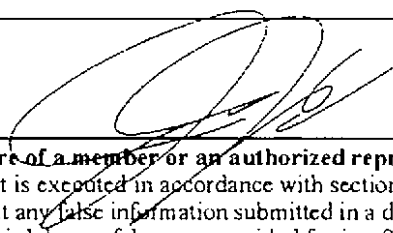
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of 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.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Paulo Melo

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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