3052201440 epartment of State Division of Corporations **Electronic Filing Cover Sheet**

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FLORIDA LIMITED LIABILITY CO. ARKKA LLC

Certificate of Status	1
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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
ARKKA LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	,
2945 SW Z3 STREET	2022
MIAMI FZ. 33145	
	의 유
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limite & Liability) Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	8: 06
· EDUARDO ARCINIEGAS	
2945 DW 73 STREET	
Miqui FL 33/45	
ARTICLE IV The name and title of each person authorized to manage and control the Lin ited Liability Company: (MGR or AMBR)	
EDUARDO ÁRCINIEGAS MOR	
	-

Required Signatures:

Signature of a member or an 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.

Typed or printed name of signee

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 herely accept the appointment as registered agent and agree to act in this capacity. I further agree to comply will 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, E.S..

Registered Agent's Signature (REQUIRED)