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

From: Account Name : MARIA XIMENA MARTINEZ
Account Number : I20220000054
Phone : (786)571-4129
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FLORIDA LIMITED LIABILITY CO.
Q-BRO'S INVESTMENTS LLC

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COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Q-BRO'S INVESTMENTS LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAUL QUILES SANTANA
Name of Person
Q-BRO'S INVESTMENTS LLC
Firm/Company
URB SAGRADO CORAZON 20 CALLE SAN MARTIN
Address
GUANICA PR 00653
City/State and Zip Code
INFO@MODERNSOLUTIONSGROUP.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAUL QUILES SANTANA at **787** **543-5949**
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

DEPT. OF STATE
 TALLAHASSEE, FLORIDA
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Q-BRO'S INVESTMENTS 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:

2424 W. BRANDON BLVD. #1282
BRANDON, FL 33511

URB SAGRADO CORAZON
20 CALLE SAN MARTIN
GUANICA, PR 00653

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.)

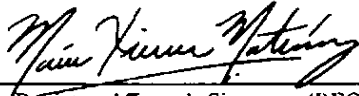
The name and the Florida street address of the registered agent are:

MARIA XIMENA MARTINEZ
Name

2424 W. BRANDON BLVD. #1282
Florida street address (P.O. Box **NOT** acceptable)

BRANDON FL 33511
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)

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(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

RAUL QUILES SANTANA
URB SAGRADO CORAZON 20 CALLE
SAN MARTIN, GUANICA PR 00653

MGR

RAUL JOSE QUILES CHACON
URB SAGRADO CORAZON 20 CALLE
SAN MARTIN, GUANICA PR 00653

(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.

The purpose of the Limited Liability Company is to engage in any lawful activity for which a Limited Liability Company may be organized in the state of Florida

REQUIRED SIGNATURE:

RAUL QUILES SANTANA

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.

RAUL QUILES SANTANA
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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TALLAHASSEE, FLORIDA

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