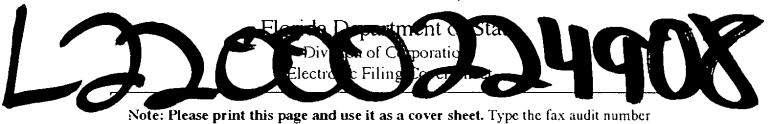
5/24/22, 5 21 AM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALING CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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

Rmail	Address:			
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FLORIDA LIMITED LIABILITY CO. THE LODNIA GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE LODNIA GROUP

(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:

18852 CANYON CREST DRIVE18852 CANYON CREST DRIVEVILLA PARK, CA 92861VILLA PARK, CA 92861

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:

VICTOR INAKI SAIZARBITORIA

Name

21 SW 15TH ROAD, SUITE 200

Florida street address (P.O. Box NOT acceptable)

 MIAMI
 FL
 33129

 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..

Victor Saizarbiforia
Registered Agent's Signature (REQUIRED)

(CONTINUED)

CASE AND/OR VIDEO FRANCHISING OF CORPORATIONS TALLAHASSEF FOR PORTIONS

To: 18506176381 From: 12147128131 Date: 05/24/22 Time: 12:23 PM Page: 03/03

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

"AMBR" = Authorized Member "MGR" = Manager			
MGR	KONSTANTIN LODNIA 18852 CANYON CREST DRIVE VILLA PARK, CA 92861		
MGR	IRINA LODNIA 18852 CANYON CREST DRIVE VILLA PARK, CA 92861		
(Use attachment if necessary)			
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REOUIRED SIGNATURE: Signature of a This document is executed an aware that any fa	specific and cannot be more than five business of meet the applicable statutory filing requirement of State's records	member. b), Florida Statutes.	-
an effective date is listed, the date must be date of filing.) te: If the date inserted in this block does not document's effective date on the Department of the Department	specific and cannot be more than five business of meet the applicable statutory filing requirement of State's records Stautiff Lodina member or an authorized representative of a couted in accordance with section 605.0203 (1) (1) also information submitted in a document to the l	member. b), Florida Statutes.	-