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ALLAHASSEE, FLORIT

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CAPITAL CONNECTION, INC.

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TRENDLINE TECHN	OLOGY LL	.c		
			ı	
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
			<u></u>	Dissolution / Withdrawał
			<u> </u>	Annual Report / Reinstatement
				Cert. Copy
			<u> </u>	Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by: SETH Name	06/01 Date			UCC 1 or 3 File
				UCC 11 Search
		Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		rileD			
The name of the Limited Liabilit	y Company is:			2022 JUN -2	AM 9: 54
TRENDI	LINE TECHNOLOGY L	c		5 6 P 10 6 1 1 1	
(Must cont	ain the words "Limited Li	ability Company, "L	L.C.," or "LLC.")	TALLAHAS	GSEE, FL
ARTICLE II - Address: The mailing address and street ad	ddress of the principal off	ice of the Limited Li	ability Company is:		
<u>Principa</u>	al Office Address:		Mailing Add	dress:	
255 ARAGON AVE	NUE	255 AI	RAGON AVENUE		
2ND FLOOR		2ND F			
CORAL GABLES, F	FL 33134		L GABLES, FL 331;	34	
The name and the Florida street a	address of the registered a				
		Name			
	255 ARAGON AVEN	UE, 2ND FLOOR			
	Florida street address (P.O. Box NOT acco	eptable)		
	CORAL GABLES	FLORID	33134		
	City	State	Zip		
Having been named as registered a place designated in this certificate, further agree to comply with the pr am familiar with and accept the ob	I hereby accept the appoi ovisions of all statutes rela	ntment as registered atting to the proper at	agent and agree to ac id complete performa	t in this capacity. nce of my duties, ai	/

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>		Name and Address:
	Authorized Member	
"MGR" = Ma	ınager	
MGR		EDUARDO ANDRES WASSI
		255 ARAGON AVENUE, 2ND FLOOR
		CORAL GABLES, FL 33134
		
		
		Fr Ç
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		50-3
		F. 9.
		<u></u>
If an effective date is he date of filing.) Note: If the date inserthe document's effection	listed, the date must be sported in this block does not make the date on the Department of	c of filing:
ARTICLE VI: Other pr		
REOUIRED	SIGNATURE: -	Alletus
	Signature of a me	ember or an authorized representative of a member.
	This document is execut	ited in accordance with section 605.0203 (1) (b), Florida Statutes.
	I am aware that any false	e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.
	Λ	ALBERTO GUZMAN
		Typed or printed name of signee