Electronic Articles of Organization For Florida Limited Liability Company

L22000314536 FILED 8:00 AM July 14, 2022 Sec. Of State snchatham

Article I

The name of the Limited Liability Company is: MORGAN PIERRE LLC

Article II

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

1680 MICHIGAN AVE SUITE 700 UNIT 272 MIAMI BEACH, FL. US 33139

The mailing address of the Limited Liability Company is:

1680 MICHIGAN AVE SUITE 700 UNIT 272 MIAMI BEACH, FL. US 33139

Article III

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

MORGAN P SHULER 1680 MICHIGAN AVE SUITE 700 UNIT 272 MIAMI BEACH, FL. 33018

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.

Registered Agent Signature: MORGAN SHULER

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR MORGAN P SHULER 1680 MICHIGAN AVE SUITE 700 UNIT 272 MIAMI BEACH, FL. 33139 US

Title: MGR ABRAHAM PIERRE C. COSTA RICA 186-188 SANTO DOMINGO ESTE, DR. 11504 DR

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Article V

The effective date for this Limited Liability Company shall be:

07/13/2022

Signature of member or an authorized representative

Electronic Signature: MORGAN SHULER

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.