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

From:
Account Name : R&P ACCOUNTING AND TAXES INC
Account Number : I20170000090
Phone : (305)358-1310
Fax Number : (305)503-6701

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Email Address: arod8723@gmail.com

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2022

FLORIDA LIMITED LIABILITY CO.
FAIS FAMILY LLC

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The name of the Limited Liability Company is:

FAIS FAMILY LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviations "LLC" or "Ltd. Co.")

ARTICLE II

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

Principal Office Address
7131 Grand National Drive Suite 103
Orlando FL 32819

Mailing Address
7131 Grand National Drive Suite 103
Orlando FL 32819

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:

ECCO PLANET CORP
Name

175 SW 7th SUITE # 1515
Florida Street address (P.O. Box NOT acceptable)

MIAMI, FL 33130
FL City, State, and 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

X.....

Registered Agent's Signature (REQUIRED)

ARTICLE IV

MGR=Manager(s) or AMBR= AUTHORIZED Member(s): The name and address of each Person authorized to manage and control the Limited Liability Company:

	Title	
JACSON DANIEL TOMAZI FAIS *7131 Grand National Drive Suite 103* *Orlando FL 32819*	*MGR*	*90%*
PATRICIA TAVARES FAIS *7131 Grand National Drive Suite 103* *Orlando FL 32819*	*MGR*	*5%*
SHARON MONIQUE TAVARES FAIS *7131 Grand National Drive Suite 103* *Orlando FL 32819*	*MGR*	*5%*

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.

REQUIRED: SIGNATURE

X _____
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.
JACSON DANIEL TOMAZI FAIS
Typed or printed name of signer

ARTICLE VI

The Five (5) Limited Liability Company will engage in any activity or business permitted under the laws of the State of Florida and the United States of America.

The main objective of the company is:
REAL ESTATE & HOLDING