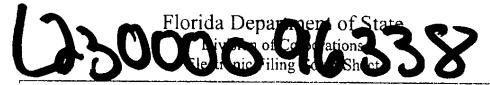
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Division of Corporations



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FLORIDA LIMITED LIABILITY CO. **IANCA 3 LLC**

Certificate of Status Certified Copy Page Count 03 Estimated Charge \$155.00

Electronic Filing Menu Corporate Filing Menu

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Page: 3 of 4

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
Ianca 3 LLC
(Must end with 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: Malling Address:
8933 SW 123 d Ct. 8933 SW 123 d Ct.
Miami, FL 33186 Mlami, FL. 33186
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:
Carlos escobar
8933 SW 123rd Ct. Apt. 407
Florida street address (P.O. Box NOT acceptable)
Miami FL 33186
City 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 603, F.S
Registered Agind's Signature (REQUIRED)

(CONTINUED)

Page Lof2

ARTICLE IV- The name and address of each person authorized to manage and control the Limited Liability Company. Title: "AMBR" - Authorized Member "MCR" - Manager MGR. "MCR" - Man		<u>!</u>
The name and address of each person substituted to manage and control the Limited Liability Company. The: "AMBR" = Authorized Member "MGR" = Manager MGR. (Use aftechment if necessary) ICLE V: Effective date, if other than the date of filing! Alternative date is listed, the date must be specific and cannot be more than five business days prior to or 90 day ate of filing.) ICLE VI: Other provisions, if any, REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florids Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated beroin are true. 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 3.17.155, F.S.)		
**AMBR' = Authorized Member **MGR' = Manager MGR		erized to manage and control the Limited Liability Company.
(Use attachment if necessary) (Use attachment if necessary) (CLEV: Effective date, if other than the date of filing! 2/28/203 (OPTIONAL) 1 effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day atso of filing.) (ICLE VI: Other provisions, if any, REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In secondance with section 605.0203 (I) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.8.)		Name and Address:
(Use attachment if necessary) ICLEV: Effective date, if other than the date of filing! 2/28/2003 (OPTIONAL) reffective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day ate of filing.) ICLE VI: Other provisions, if any, REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florids Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts state herein are true. 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.)	"MGR" = Manager	Carlus Escobar 8935 Sw 1250 Ct Apt. 407 Miamy FC 33186
CLEV: Effective date, if other than the date of filing!	MGC	Linda U. Graciani 9935 SW 1232 Ct. Apt, 407 Miami, Fl. 33186
CLEV: Effective date, if other than the date of filing!		
CLEV: Effective date, if other than the date of filing!		
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. 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.)	CLEV: Effective date, if other than the date of	f filing! 2/28/2023 (OPTIONAL) ific and cannot be more than five business days prior to or 90 days
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Typed or printed name of signee	(In accordance with section 60 constitutes an affirmation und I am aware that any falso info constitutes a third degree felo	5.0203 (1) (b), Florids Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State ny as provided for in s.817.155, F.S.)
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