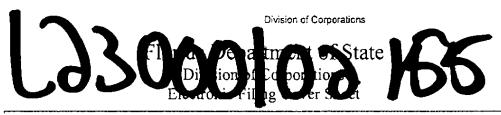
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Division of Corporations

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From:

Account Name : ELO ENTERPRISES, INC

Account Number : I20150000109 : (561)544-8862 Phone : (954)597-0130 Fax Number

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Email Address: sales@eloenterprises.us

FLORIDA LIMITED LIABILITY CO. STEGRACAPI, LLC

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ARTICLESOFORGANIZATIONFORFLORIDALIMITEDLIABILITYCOMPANY

STEGRACAPI, I		· · · · · · · · · · · · · · · · · · ·
(Must con	itain the words "Limited Liabil	lity Company, "L.J.,C.," or "LLC.")
ARTICLE II - Address:		
The mailing address and street	address of the principal office o	of the Limited Liability Company is:
<u>Princi</u>	pal Office Address:	Mailing Address:
4790 N CITATION	DR #202	4790 N CITATION DR #202
DELRAY BEACH, ARTICLE III - Registered A; The Limited Liability Compan	gent, Registered Office, & Reg y cannot serve as its own Regis	DELRAY BEACH, FL 33445
DELRAY BEACH, ARTICLE III - Registered A; (The Limited Liability Compananother business entity with an	gent, Registered Office, & Regist cannot serve as its own Regist active Florida registration.)	egistered Agent's Signature: stered Agent. You must designate an individual or
DELRAY BEACH, ARTICLE III - Registered A	gent, Registered Office, & Registered office, & Registered office, active Florida registration.)	DELRAY BEACH, FL 33245 egistered Agent's Signature: stered Agent. You must designate an individual or et are: S, INC.
DELRAY BEACH, ARTICLE III - Registered A; (The Limited Liability Compananother business entity with an	gent, Registered Office, & Regist active Florida registered agent address of the registered agent ELO ENTERPRISES	egistered Agent's Signature: stered Agent. You must designate an individual or at are: S, INC.
DELRAY BEACH, ARTICLE III - Registered A; (The Limited Liability Compananother business entity with an	gent, Registered Office, & Regist cannot serve as its own Regist active Florida registration.) address of the registered agent	DELRAY BEACH, FL 33245 registered Agent's Signature: stered Agent. You must designate an individual or at are: S, INC. ne
DELRAY BEACH, ARTICLE III - Registered A; (The Limited Liability Compananother business entity with an	gent, Registered Office, & Regist active Florida registered agent address of the registered agent ELO ENTERPRISES Nan	egistered Agent's Signature: stered Agent. You must designate an individual or at are: 5, INC. ne Blvd #202 D. Box NOT acceptable)

(CONTINUED)

Registered Agent's Signature (REQUIRED)

. . . .

<u>Title:</u> "AMBR" = Authori	Name and Address: Member
"MGR" = Manager	
MGR	ANDREA BARONE CATERINA
	4790 N CITATION DR #201
	DELRAY BEACH, FL 33445
MGR	
NON	ELIZABETH BARONE CATERINA
	4790 N CITATION DR #202
	DELRAY BEACH, FL 33445
If an effective date is listed, the date of filing.) Note: If the date inserted in the	ther than the date of filing: date must be specific and cannot be more than five business days prior to or 90 days after the does not meet the applicable statutory filing requirements, this date will not be listed the Department of State's records.
ARTICLE VI: Other provision	
REQUIRED SIGNA	URE: Andrea Barone Caterina (Mar 2, 2023 16:43 EST:
	gnature of a member or an authorized representative of a member.
This	cument is executed in accordance with section 605,0203 (1) (b). Florida Statutes
i am	are that any false information submitted in a document to the Department of State
const	tes a third degree felony as provided for in s.817.155, F.S.
	ANTIBLEA DADONT CATTERIAL AVE.
	ANDREA BARONE CATERINA - Manager
	Typed or printed name of signee