Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.

Account Number : I20070000019 Phone : (518)689-1212 Fax Number : (518)432-0742

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

FLORIDA LIMITED LIABILITY CO.

OFF GRID HOSPITALITY LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Articles of Organization for Florida Limited Liability Company

ARTICLE I NAME

The name of the Limited Liability Company is: OFF GRID HOSPITALITY LLC

ARTICLE II ADDRESS

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

Principal Office Address: 425 E DILIDO DR, MIAMI BEACH, FL 33139

Mailing Address: 425 E DILIDO DR, MIAMI BEACH. FL 33139

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

PETER KLEIN, 425 E DILIDO DR, MIAMI BEACH, FL 33139

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 the Chapter 605, F.S..

/s/ PETER KLIEN	
Registered Agent's Signature	

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ARTICLE IV AUTHORIZED REPRESENTATIVE / MANAGER

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

ALAIN PALINSKY, Authorized Representative, 425 E DILIDO DR, MIAMI **BEACH, FL 33139**

PETER KLEIN, Authorized Member, 425 E DILIDO DR, MIAMI BEACH, FL 33139

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

/s/ PETER KLEIN	
Authorized Representative	
/s/ PETER KLEIN	
Authorized Member	