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FLORIDA LIMITED LIABILITY CO. QUADRA VISION GROUP LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name:

The name of the Limited Liability Company is:			
Quadra Vision Group LLC			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Lia	hilita		
1439 West 44th Terrace Hinkah FL, 33012	ошку		
			-
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liab With an active Florida registration.)	lluy		-
Moises Yorl Garcia Alfonso 1439 West 44th Terrace Hiateh FL, 33012	INTLAH SELEKE	2028 AUG	
	SEE C	<u> </u>	
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)	FLORID	M 2: 48	Ö
Laula Krystal Vera Martinez (AMBR) Moises Youl Garcia Alfonso (AMBR)			
Picardo Gabiel Delgado Martinez (AMBR)			
			

.- I'g,

Required Signatures:

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.

Typed or printed name of signee

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..

Registered Agent's Signature (REQUIRED)

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