Division of Corporations **Electronic Filing Cover Sheet**

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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

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

Email Address: a rod 8723 a gmail. com

FLORIDA LIMITED LIABILITY CO. OM QUANTIK LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The name of the Limited Liability Company:

OM QUANTIK LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II

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

Principal and Mailing Address

1859 S OCEAN DR UNIT 3107 HALLANDALE BEACH, FL 33009

2024 FEE -6 For 1:35

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:

R&P ACCOUNTING & TAXES, INC

150 SE 2ND AVE SUITE 404
Florida Street address (P.O. Box NOT acceptable)

MIAMI, FL 33131 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.

Registered Agent's Signature (REQUIRED)

2024 FE -8 11 1:30

ARTICLE IV

MGR=Manager(s) or AMBR= \(\text{UTHORIZED}\) Member(s):

The name and address of each Person nathorized to manage and control the Limited Liability Company:

AMBR

JOSE ANTONIO SERRA NOITALES 1859 S OCEAN DR UNIT 3107 HALLANDALE DEACH, FL 33009

ARTICLE V

Effective date, if other than the date of filing (OPTIONAL)

ilf 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.)

FEBRUARY 15TH, 2024

REQUIRED: SIGNATURE

Signature of Binember or an authorized representative of a member.

JOSE ANTONIO SERRA NOHALES

tin accordance with section 695,0203(1) (b), Florada Statutes, the execution of this document consutures on affirmation under the penalties of perjury that the facts stated herein are true.

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ARTICLE VI

The Florida 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:

FILM PRODUCTION

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