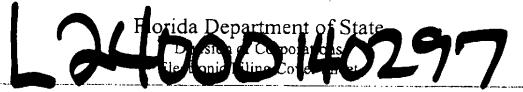
Division of Corporations



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Division of Corporations

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## FLORIDA LIMITED LIABILITY CO. 4835 PINE DRIVE, LLC

Certificate of Status	0
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Page Count	02
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	4835	PINE DRIVE, LL	C
(Must conta	in the words "Limited.	Liability Company	, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal o	ffice of the Limited	d Liability Company is:
Principa	LOffice Address:		Mailing Address:
6990 NW 3	STH STREET		6990 NW 25TH STREET
MIAM  ARTICLE III - Registered Ager The Limited Liability Company on their business entity with an ac	annot serve as its own tive Florida registratio	Registered Agent. n.)	MIAMI, FL 33122  ut's Signature: You must designate an individual
MIAM  ARTICLE III - Registered Ager The Limited Liability Company contoner business entity with an ac	nt, Registered Office, annot serve as its own tive Florida registratio	Registered Agent. n.) agent are:	nt's Signature:
MIAM ARTICLE III - Registered Ager	nt, Registered Office, annot serve as its own tive Florida registratio	Registered Agent. n.) agent are: AUL CREMATA	nt's Signature:
MIAM  ARTICLE III - Registered Ager The Limited Liability Company contoner business entity with an ac	nt, Registered Office, annot serve as its own tive Florida registratio	Registered Agent. n.) agent are: AUL CREMATA Name	nt's Signature: You must designate an individual
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MIAM  ARTICLE III - Registered Ager The Limited Liability Company contoner business entity with an ac	nt, Registered Office, annot serve as its own tive Florida registration ddress of the registered R.	Registered Agent. n.) agent are: AUL CREMATA Name Name	nt's Signature: You must designate an individual

H p. fu juriner 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 colligations of my position as registered agent as provided for in Chapter 605, F.S.

> Kaul Cremata Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

DocuSign Envelope ID: 50DF44FE-2071-487B-9938-4B6AAC82B287

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	RAUL CREMATA 6990 NW 25TH STREET MIAMI, FL 33122
What amount are also	<del>-</del>
fective date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days
LE V: Effective date, if other than the diffective date is listed, the date must be of filing.) If the date inserted in this block does no ument's effective date on the Department.	specific and cannot be more than five business days prior to or 90 days of meet the applicable statutory filing requirements, this date will not be listent of State's records.
LE V: Effective date, if other than the diffective date is listed, the date must be of filing.)  If the date inserted in this block does not ument's effective date on the Department.	specific and cannot be more than five business days prior to or 90 days of meet the applicable statutory filing requirements, this date will not be listed of State's records.
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ILE V: Effective date, if other than the diffective date is listed, the date must be of filing.)  If the date inserted in this block does not ument's effective date on the Department LE VI: Other provisions, if any.  COMPANY SHALL BE A MEMBER.  REQUIRED SIGNATURE:  Signature of a This document is executed a may a constitutes a third degree.	managed entity.  MANAGED ENTITY.  MANAGED Entity.  Managed in a document to the Department of State statutes. Its in a document to the Department of State statutes. Its in a document to the Department of State received for in s.817.155. F.S.    OSCAR J. RODRIGUEZ   Typed or printed name of signet   Filing Fees;   Organization and Designation of Registered Agent   Organization and Organization   Organization   Organization   Organization   Organization   Organization   Organization   Organization   Organization