

224000196041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

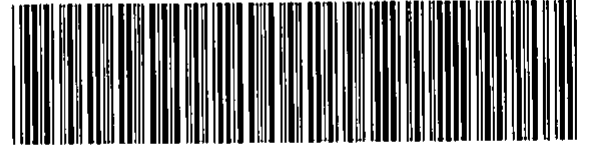
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



100427620871



FILED

2024 MAY -1 PM 9:47

CLERK OF STATE
TALLAHASSEE, FL

RECEIVED

2024 MAY -1 PM 3:33

CLERK OF STATE
TALLAHASSEE, FLORIDA



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext:

To: Department Of State, Division Of Corporations
From: Shauna Godbolt
Ext:
Date: 05/01/24
Order #: 1488699-1
Re: PICCOLA GIA LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$125.0 - FL State Account Number:

120000000195

auth

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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2024 MAY -1 AM 9:57
DIVISION OF STATE
TALLAHASSEE FL

**ARTICLES OF ORGANIZATION
OF
PICCOLA GIA LLC**

The undersigned, being a duly authorized representative of a member, desiring to form a limited liability company under and pursuant to the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes, does hereby adopt the following Articles of Organization:

**ARTICLE I
NAME**

The name of the limited liability company is: **PICCOLA GIA LLC** (the "Company")

**ARTICLE II
ADDRESS**

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

Principal Office Address:
10601 SW 128 Avenue
Miami, FL 33186

Mailing Address:
10601 SW 128 Avenue
Miami, FL 33186

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

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

Interamerican Corporate Services LLC
2525 Ponce De Leon Blvd., PH 12th Floor
Coral Gables, Florida 33134

Having been named as registered agent and to accept service of process for the above 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.

INTERAMERICAN CORPORATE SERVICES LLC

By: DocuSigned by:
Margarita Barreto Tercilla
8430679002E041A
Maggie Barreto Tercilla, Manager

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TALLAHASSEE, FL

ARTICLE IV
OPERATING AGREEMENT

The power to adopt, alter, amend, or repeal an operating agreement for the Company shall be vested in the Members of the Company.

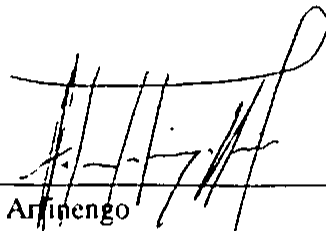
ARTICLE V
MANAGEMENT

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

Title:
Manager

Name and Address:
Stefano Arfinengo
10601 SW 128 Avenue
Miami, FL 33186

24 IN WITNESS WHEREOF, the undersigned hereby executes these Articles of Organization as of the day of April, 2024.



Stefano Arfinengo
Duly Authorized Representative of a Member

CSC FIN-47402

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TALLAHASSEE, FL