Division of Corporations Electronic Filing Cover Sheet

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	Fax Number	: (850)617-6381			
From:			5.	2024	
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	ÄLL		
	Account Number	: I2 00000 00019	-	MA	-17
	Phone	: (305)552-5973		===	
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**		iddress for this business entity to be used for fut	ure	\equiv	٠,
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FLORIDA LIMITED LIABILITY CO. GRAN SABANA INVESTMENT, LLC

Certificate of Status	1	
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Estimated Charge	\$130.00	

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ARTICLES OF ORGANIZATION FOR

FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
GRAN SABANA INVESTMENT, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
1780 NW 93 pre Dois Floride 33/72
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (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.) Domings Long Do Color To Confer Fl. 33/43
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR) Mitha Mirry Southy MGR Dominys Lennoids Da bite MGR

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 of 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)