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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

#### MAGUS INVESTMENT GROUP LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

### ARTICLE [] - Address:

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

Principal Office Address: Mailing Address: 181 CRANDON BLVD. 181 CRANDON BLVD. **UNIT 202 UNIT 202 KEY BISCAYNE, FL 33149** KEY BISCAYNE, FL 33149 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:

AUGUSTO I. PEREZ				ڻ ن
	Name		T+;	1
181 CRANDON BLV	D., UNIT 202			
Florida street address	(P.O. Box <u>NOT</u> a	ccoptablo)		
KEY BISCAYNE	FL	33149		
City	State	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 duttes, 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) (CONTINUED)

# ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
MGR	AUGUSTO I. PERBZ 181 CRANDON BLVD., UNIT 202 KEY BISCAYNE, FL 33149	· · · · · · · · · · · · · · · · · · ·	
<u>MGR</u>	LUCIANA CRUZALEGUI 181 CRANDON BLVD., UNIT 202 KEY BISCAYNE, FL 33149		
			<u>]d</u>
(Use attachment if necessary)			IIV 15
E V: Effective date, if other than the date of	of filine:	. (OPTIONAL)	. ;;

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90<sup>4</sup> days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

AUGUSTO I, PEREZ

Typed or printed name of signee

## Filling Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Cariffied Copy (Optional)

\$ 5.00 Certificate of Status (Optional)