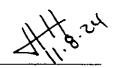
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Division of Corporations ;





Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

10:	Division of Corporations	2.	53
	Fax Number : (850)617-6381		
From:			<u></u>
	Account Name : PS KIS LLC	* == .	(1)
	Account Number : I20240000110		2.5
	Phone : (407)707-4914		ئے ت
	Fax Number : (407)337-8957		

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

Email	Address:		* i	
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FLORIDA LIMITED LIABILITY CO.

Leeway Business Group LLC

Certificate of Status	U
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Corporate Filing Menu

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To: +18506176381

COVER LETTER

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	Leeway Business Group LLC		\tilde{A}	`:	
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The enclo	sed Articles of Organization and fee(s) are st	ibmitted for filing.	ı J		
Please reti	ım all correspondence concerning this matte	r to the following:	;		
	Marcus Paulo L Segnini		,		
		Name of Person			
		. "	-tro		
	PS KIS LLC	. `.	ilic		
t.		Firm/Company		î,	
문 소.	6526 Old Brick Road, suite 120-238	F	•		
		Address as	d.		
, ,	Windermere		-	•	***
	City	State and Zip Coders	ii.		
	contact@kisconsult.com		n i		
	E-mail address: (to be used for	future annual report no	tification)		
For further	information concerning this matter, please ca	H:			
	Marcus Paulo I. Segnini 407	7486462,	•	; ;	
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Enclosed i	s a check for the following amount:		•	٠ (
	O Filing Fee Status Certificate of Status	□\$155.00 Filing Fee Certified Copy additional copy is enclosed.	Certificati sed) Certified (Filing Fee, e of Status & Copy copy is enclos	sed)
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	Mailing Address New Filing Section	Street Address New Filing Sect	ion Division	; !	24 NOV
	Division of Corporations P.O. Box 6327	The Centre of T 2415 N. Monro	Callahassee e Street, Suite 810		8- /

Tallahassee, FL 32303

Tallahassee, FL 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE 1 - Name: The name of the Limited Liability Company is: Leeway Business Group LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: <u> 23</u> Principal Office Address: Mailing Address: 11845 Waterstone Loop Dr 11845 Waterstone Loop Dr. Windermere, FL 34786 Windermere, FL 34786 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:

	PS KIS LLC		
		Name	
	6526 Old Brick Roa	id, suite 120-238	
SHEET	Florida street addre	ss (P.O. Box <u>NO</u>	🛚 acceptable)
	Windermere	FL	34786
	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 duties, and lam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

> Marcos Paulo Lertão Seguri Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

SUPLITY

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Title: "AMBR" – Authorized Member	Name and Address:	
'MGR" = Manager		
L AMBR	Jose Waldyr Machado Vasconcellos Junier	
.64	11845 Waterstone Loop Dr Windermere 34786 .	 ·.
·		 .
"AMBR	i Σ ξii.	
AMBR	Maria Alexandra Costa Vasconcellos 11845 Waterstone Loop Dr Windermere 34786	
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