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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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 Phone : (954)384-8565 Fax Number : (954)385-5175

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

Email Address: Office @ eflatinaccounting Co

FLORIDA LIMITED LIABILITY CO. FROMGOD PROPERTY INVESTMENT LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

2024 DEC -3 PH 4: 05 SECRETARY OF STATE **New Filing Section**

TO:

From: DIEGO FIGUE

COVER LETTER

Div	rision of Co	rporations				
SUBJECT:		D PROPERTY II	NVESTM	IENT LLC		
3000001.		N'a	me of Lir	nited Liabili	ty Company	
The enclose	d Articles of	Organization and	l fee(s) ar	e submitted	for filing.	
Please return	all corresp	ondence concerni	ng this m	atter to the fo	ollowing:	
	DIEGO FIG	UEROA				
-				Name of	Person	
1	E & F LATI	N GROUP LLC				
-		·····		Firm/Cor	npany	
	1820 N COF	RPORATE LAKE	S BLVD	SUITE 109		
-		<u></u>		Addre	ss	
,	WESTON F	L 33326				
D	IEGO@EFI	LATINACCOUN		lity/State and	Zip Code	
<u> </u>					nual report notificat	ion)
For further inf	formation co	ncerning this mat	ter, please	e call:		
I	DIEGO FIGU	JEROA	at (954	384 8565	
_	Nam	e of Person	`A	rea Code	Daytime Telephon	e Number
Enclosed is a	a check for t	he following amo	unt:			
□\$125.00 F	Filing Fee	■\$130.00 Filin Certificate of S		Certifie	.00 Filing Fee & d Copy I copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division P.O. B	g Address iling Section on of Corporation ox 6327 assee, FL 32314	s	? T 2	itreet Address New Filing Section D The Centre of Tallaha 415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FROMGOD PROPERTY INVESTMENT LLC

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

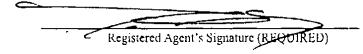
ARTICLE II - Address:

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

City

<u>Principal</u>	Office Address:		Mailing Ad-	dress:		
1000 BRICKELL PLA MIAMI FL 33131	ZA UNIT 2102		ICKELL PLAZA (FL 33131	JNIT 2102	20	
ARTICLE III - Registered Agen (The Limited Liability Company c another business entity with an ac The name and the Florida street ad	annot serve as its own live Florida registratio	Registered Agent. You n.) agent are:	Signature: must designate an i		2024 DEC -3 PM 4: 05	theyar to make they the
		E LAKES BLVD SUIT (P.O. Box <u>NOT</u> accep				
	WESTON	FLORIDA	33326			

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..



State

Zip

(CONTINUED)

From: DIEGO FIGUE

ARTICLE IV-

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

Title:		Name and Address:			
"AMBK" = "MGR" = N	Authorized Member				
	, tanagei	ANDRES LOPERA			
<u>AMBR</u>		1000 BRICKELL PLAZA UNIT 2102_		_	
		MIAMI FL 33131		ZOZY DEI	
			Æ CR	Ç	ette per
<u>MGR</u>		ADONY JARAMILLO	—— ———————————————————————————————————	53	WENTERED IN
		MIAMI FL 33131	 돌중 -	_ట	
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ARTICLE V: Effect (If an effective date in the date of filing.) Note: If the date ins the document's offect	erted in this block does not me tive date on the Department o	cific and cannot be more than five business deet the applicable statutory filing requirement.	iays prior to or 9	•	
ARTICLE VI: Other	provisions, if any.				
					-
					•
					•
REOUIRE	DSIGNATURE:				
	-				
	Signature of a mer	nber or an authorized representative of a m	nember		
		d in accordance with section 605.0203 (1) (b)		i.	
	I am aware that any false:	information submitted in a document to the De			
	constitutes a third degree	felony as provided for in s.817.155, F.S.			

Filing Fres:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

DIEGO FIGUEROA

Typed or printed name of signee

5 5.00 Certificate of Status (Optional)