5/25/22, 9:50 AM

To:

Division of Corporations



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To:

Division of Corporations

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# FLORIDA LIMITED LIABILITY CO. SALAZAR INTERNATIONAL INVESTMENTS LLC

 Certificate of Status
 0

 Certified Copy
 1

 Page Count
 03

 Estimated Charge
 \$155.00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

#### SALAZAR INTERNATIONAL INVESTMENTS 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:

### **Principal Office Address:**

Mailing Address:

| 701 S MIAMI AVENUE | 701 S MIAMI AVENUE |
|--------------------|--------------------|
| SUITE 277C         | SUITE 277C         |
| MIAMI, FL 33130    | MIAMI, FL 33130    |

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:

| ANDREA SALAZ        | AR                          |                                       |
|---------------------|-----------------------------|---------------------------------------|
|                     | Name                        | · · · · · · · · · · · · · · · · · · · |
| 701 S MIAMI AV      | ENUE SUITE 277C             |                                       |
| Florida street addr | ess (P.O. Box <u>NOT</u> ac | cceptable)                            |
| MIAMI               | FL                          | 33130                                 |
| 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 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)

CABLE AND/OR VIDEO FRANCHISING DIVISION OF CHISING

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

| Title:  | Name and Address:                         |   |
|---|---|---|
| "AMBR" = Authorized Member                        |   |   |
| "MGR" = Manager                                   |   |   |
| AMBR, MGR   | ANDREA SALAZAR                            |   |
| THINDIG MOR                                       | 701 S MIAMI AVENUE SUIT                   | E 277C                                      |
|   | MIAMI, FL 33130                           |   |
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| (Use attachment if necessary)                     |   |   |
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| ARTICLE V: Effective date, if other than the o    |   |   |
| (If an effective date is listed, the date must be | specific and cannot be more than five     | business days prior to or 90 days after     |
| the date of filing.)                              |   |   |
| Note: If the date inserted in this block does no  |   | equirements, this date will not be listed a |
| the document's effective date on the Department   | ent of State's records.                   |   |
|   |   |   |
| ARTICLE VI: Other provisions, if any.             |   |   |
| COMPANY PURPOSE : ANY AND ALL LA                  | AWFUL ACTIVITIES                          | <u> </u>                                    |
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| DUALIDDE CICY ATURE                               |   |   |
| REQUIRED SIGNATURE:                               | $\mathcal{A}$                             |   |
|   | - (M2n)                                   |   |
| Signature of a                                    | member or an authorized represents        | utive of a mumber                           |
| oigiiatui e oi a                                  | . AIR-HORE OF BU BUILDING TO TELL CONTROL | INTO DA AL INCUIDOL.                        |

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.

ANDREA SALAZAR

Typed or printed name of signee

#### Filing Fees:

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)