

8/15/24, 12:05 PM

Division of Corporations

## Florida Department of State

Division of Corporations  
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Account Number : 120210000179  
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## FLORIDA LIMITED LIABILITY CO.

## QUADRO S708 LLC

Certificate of Status	1
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**ARTICLES OF ORGANIZATION OF  
QUADRO S708 LLC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**QUADRO S708 LLC**

**ARTICLE II - Address:**

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

121 Alhambra Plaza, Suite 1500  
Coral Gables, FL 33134

**ARTICLE III - Registered Agent and Registered Office**

The name and the Florida street address of the initial registered agent are:

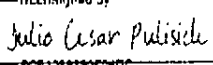
ALEJANDRO E. JORDAN, JD. P.A.  
121 Alhambra Plaza, Suite 1500  
Coral Gables, FL 33134

**ARTICLE IV - Managers**

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

<u>Title</u>	<u>Name and Address</u>
<b>Manager</b>	<b>JULIO CESAR PULISICH</b> 121 Alhambra Plaza, Suite 1500 Coral Gables, FL 33134

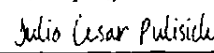
IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledge them to be my act this 13th day of August, 2024.

Notarized by  
  
 Name: JULIO CESAR PULISICH  
 Title: Manager

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(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 Section 817.155, F.S.)

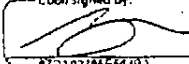
Designated by  
  
FCR1529198704CF  
Name: JULIO CESAR PULISICH  
Title: Manager

#### STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 605, Florida Statutes.

(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 Section 817.155, F.S.)

Signature of Registered Agent

Executed by:  
  
BY: Alejandro E. Jordan, JD, P.A.  
Title: Registered Agent

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