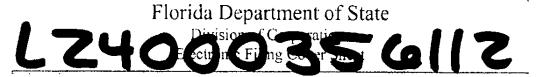
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Division of Corporations



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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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Phone

: (305)328-4774 Fax Number

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

Email:	Address:		

FLORIDA LIMITED LIABILITY CO.

17805 NW LLC

Certificate of Status	()
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

20/24 AUS 16

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	y Company is:				
17805 NW LLC					
(Must conta	in the words "Limited	Liability Company.	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street ad	ldress of the principal (office of the Limited	Liability Company is:		
<u>Principa</u>	l Office Address:		Mailing Address:		
15563 SW 55 Terr. Miami FL 33185			15563 SW Terr. Miami FL 33185		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a-	cannot serve as its owr ctive Florida registration	n Registered Agent. 'on.)	it's Signature: You must designate an individual or		
	Georgina Blanco, PA	\			
Name					
10261 Sunset Dr. Suite C-101					
	Florida street address (P.O. Box NOT acceptable)				
	Miami	FL	33173		
	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..

Georgina Blanco

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Membe	Name and Address;				
"MGR" = Manager	er				
MGR	Eatopia LLC, a Delaware limited liability company 15563 SW 55 Ter Mianni, FL 33185				
MGR	3KN Holdings LLC, a Delaware limited liability company 15563 SW 55 Ter Miami, FL 33185				
MGR	Julio Del Toro 15563 SW 55 Ter Miami, FL 33185				
(Use attachment if necessary)					
an effective date is listed, the date m date of filing.)	n the date of filing: August 12, 2024 (OPTIONAL) ust be specific and cannot be more than five business days prior to or 90 days aft does not meet the applicable statutory filing requirements, this date will not be listed partment of State's records.				
RTICLE VI: Other provisions, if any.					
REQUIRED SIGNATURE:	Ma				



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.

3KN Holdings LLC, a Delaware ltd Eab co (Noelbis Diaz)
Typed or printed name of signce

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)