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Koutoulas & Relis, LLC 954 332 1346
Division of Corporations

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Florida Department of State
Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
GEM NEXUS LLC

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H25000045247 3
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**ARTICLES OF ORGANIZATION
OF
GEM NEXUS LLC**

The undersigned, acting as organizer of GEM NEXUS LLC a company organized and created pursuant to Chapter 605, Florida Statutes hereby adopt the following Articles of Organization for said Florida limited liability Company:

ARTICLE I.

The name of the limited liability company shall be:

GEM NEXUS LLC

ARTICLE II.

The mailing and street address of the principal office of the limited liability company is:

7865 NW 104th Avenue Apt 24
Doral, FL 33178

ARTICLE III.

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

Fabiana Frois
7865 NW 104th Avenue Apt 24
Doral, FL 33178

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.



Fabiana Frois Registered Agent

Prepared by:
Koutoulas & Relis, LLC
777 Yamato Road Ste 100
Boca Raton, FL 33431
Phone: (954) 332-1345
Fax: (954) 332-1346

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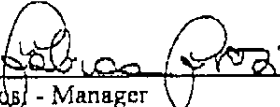
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ARTICLE IV.

This limited liability company is to be managed by one manager. The name and address of the Manger is as follows:

Fabiana Frosi - Manager
7865 NW 104th Avenue Apt 24
Doral, FL 33178

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties or 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 s.817-155, F.S.



Fabiana Frosi - Manager
*Signature of Member or authorized representative of a member

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