

L10000005065

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
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From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

Effective Date 01/13/10

\*\*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/FOREIGN LIMITED LIABILITY CO.  
arco properties of florida, llc

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARCO PROPERTIES OF FLORIDA, LLC  
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

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TALLAHASSEE, FLORIDA

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ARTICLE II - Address:

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

Principal Office Address:  
5275 Images Circle Suite 105  
Kissimmee, FL 34746

Mailing Address:  
5275 Images Circle Suite 105  
Kissimmee, FL 34746

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

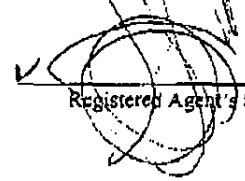
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Effective Date 01/13/10

SERGIO E. HECHIM  
Name  
5275 Images Circle Suite 105  
Florida street address (P.O. Box **NOT** acceptable)  
Kissimmee FL 34746 FL  
City, State, and 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 608, F.S.*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

H10000009394

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

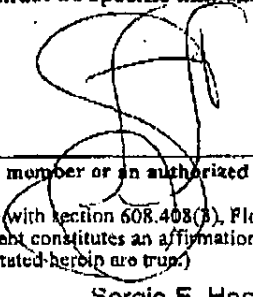
<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
<u>MGRM</u>	<u>Jose L. Freitas</u> <u>5275 Images Circle Apt 105</u> <u>Kissimmee, FL 34746</u>
<u>MGRM</u>	<u>Carlos J. Rodriguez</u> <u>2431 Praire View Dr</u> <u>Winter Garden, FL 34787</u>
<u>MGRM</u>	<u>Gullermo A. Duplessis</u> <u>3915 Township Square Blvd Apt 1412</u> <u>Orlando, FL 32837</u>
<u>MGRM</u>	<u>Claudia Revollo</u> <u>5980 Westgate Dr Apt 201</u> <u>Orlando, FL 32835</u>

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**ARTICLE V:** Effective date, if other than the date of filing: 01/13/2010 (OPTIONAL)  
 (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.)

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Sergio E. Hechim

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)

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**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
<u>MGRM</u>	<u>Sergio E. Hechim</u> <u>5275 Images Circle Apt 105</u> <u>Kissimmee, FL 34746</u>
<u>MGRM</u>	<u>Rodolfo A. Martuchi</u> <u>3915 Township Square Blvd Apt 1412</u> <u>Orlando, FL 32837</u>
<u>MGRM</u>	<u>Carlos A. Ontivero</u> <u>4823 Watervista Dr</u> <u>Orlando, FL 32821</u>
<u>MGRM</u>	<u>Carlos A. Saez</u> <u>2624 Holly Pine Circle</u> <u>Orlando, FL 32820</u>

(Use attachment if necessary)

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Typed or printed name of signer

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