

L12000041763

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H12000078206 3)))



H120000782063ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

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

Email Address: _____

RECEIVED
12 MAR 26 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
ACUMEN ORIENTAL LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

FILED
12 MAR 26 AM 7:30
SECRETARY OF STATE
DIVISION OF CORPORATIONS

H12000078206

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ACUMEN ORIENTAL LLC.

(Must end with 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:

1137 NW 123RD COURT
MIAMI, FL 33182

Mailing Address:

1137 NW 123RD COURT
MIAMI, FL 33182

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:

LIU CHAO-LUNG

Name

1137 NW 123RD COURT

Florida street address (P.O. Box **NOT** acceptable)

MIAMI

FL 33182

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)

Page 1 of 2

H12000078206

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 26 AM 7:31

H 1 2 0 0 0 0 7 8 2 0 6

ARTICLE IV – Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

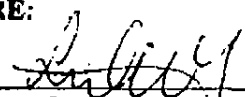
<u>Title:</u> "MGR"= Manager "MGRM"= Managing Member	<u>Name and Address:</u>
--	--------------------------

MGR	CHAO-LUNG LIU 1137 NW 123 RD COURT MIAMI FL 33182
-----	--

MGRM	PEI-LU BETTY CHANG 1137 NW 123 RD COURT MIAMI FL 33182
------	---

ARTICLE V – Effective date, if other than the date of filing ;.....(OPTIONAL)

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. I am aware that any false information submitted in a document to the Department of State constitutes a third felony as provided for in s.817.155, F.S.)

CHAO – LUNG LIU

(Typed or printed name of signee)

H 1 2 0 0 0 0 7 8 2 0 6

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 26 AM 7:30