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(Document Number)
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a 03/21/16

COVER LETTER

	Sumarium B LLC
SUBJECT:	Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
	Francisco Vilaseca
-	Name of Person
-	Firm/Company
	485 Brickell Avenue #4807
-	Address
	Miami, Florida 33131
_	Franciso Vilaseca 610 gmail.com
	E-mail address: (to be used for future annual report notification)
or further inf	formation concerning this matter, please call:
F 	Francisco Vilaseca at (786) 420 - 0 3 3 5
	Name of Person Area Code Daytime Telephone Number
Enclosed is a	a check for the following amount:
\$125.00 Fili 	ng Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:		
Sumarium B, LLC			
	ith the words "Limited	d Liability Compa	any, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	dress of the principal c	office of the Limit	ted Liability Company is:
<u>Principal</u>	Office Address:		Mailing Address:
485 Brickell Avenue		4	85 Brickell Avenue
#4807			4807
Miami, Florida 33131		N	fiami, Florida 33131
ARTICLE III - Registered Agen (The Limited Liability Company of another business entity with an ac The name and the Florida street ac	annot serve as its own tive Florida registration	Registered Ager on.)	gent's Signature: nt. You must designate an individual or
	Francisco Vilaseca		
		Name	
	485 Brickell Avenue	#4807	
	Florida street addres	s (P.O. Box <u>NO</u>	[acceptable)
	Miami	Fl	33131
	City	State	Zip
Having been named as registered ag	ent and to accept serv	ice of process for	the above stated limited liability company o

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..

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR	Francisco Vilaseca	
	485 Brickell Avenue # 4807	
	Miami, Florida 33131	
MGR	Carlos Alfredo Vecchio Demari	
	485 Brickell Avenue # 4807	
	Miami, Florida 33131	
(Use attachment if necessary)		
	02/01/001/	
FICLE V: Effective date, if other than the date of	f filing: 03/01/2016 (OPTIONAL)	down of
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ARTICLE IV-

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)