Florida Department of State

Division of Corporations Public Access System

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

DECO CODE, LLC

Certificate of Status	0
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C. LEWIS

MAR -2 2009

EXAMINER

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FROM : LAZARUS

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H09000046591

SECRETARY UT STATE

	TALLAHASSEET LOTTE
ARTICLES OF ORGANIZATION FO	R FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Compa	ny is:
DECO CODE, LLC (Must end with the words "Limited	
(Must end with the words "Limited	d 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:	Mailing Address:
7383 NW 13 55 MAMI, FL 38172	9383 NW 13 5T MIAMI, FL 33172
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another f the registered agent are: RODRIGUE Z Name
9383 NW	13 ST
Florida su	reet address (P.O. Box NOT acceptable)
Hiani	State, and Zip
City,	State, and Zip
liability company at the place designat registered agent and agree to act in this co statutes relating to the proper and comp	and to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and is registered agent us provided for in Chapter 608, F.S
Dele	ecceee Don
Registered Agent's	Signature (REQUIRED)
1	

(CONTINUED) Page 1 of 2

H09000046591

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'Title: "MGR" = Manager "MGRM" = Managing Mem	Name and Address:
tlangaer	Adriana Pedriquez
	0198 NW 1185 CK
•	Mianu, to 33178.
	<u> </u>
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	than the date of filing: (OPTIONAL)
LEV: Effective date, if other fective date is listed, the dat days after the date of filing.	than the date of filing: (OPTIONAL) emust be specific and cannot be more than five business days p
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LEV: Effective date, if other fective date is listed, the dat days after the date of filing. REOUIRED SIGNATURE Signature of (In accordant of this document of the date of t	than the date of filing: must be specific and cannot be more than five business days p continued by the specific and cannot be more than five business days p description of an authorized representative of a member. The with section 608.408(3), Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury at stated berein are true.)
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