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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Рһоле : (305) 634-3694 : (305)633-9696 Fax Number

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

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## FLORIDA LIMITED LIABILITY CO. CARCHY, LLC

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EXAMINE



ARTICLE I - Name:

The name of the Limited Liability Company is Carchy, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Carchy, LLC. is c/o 2950 SW 27th Avenue, Miami, Fl 33133.

ARTICLE III - Registered Agent:

The name of the Registered Agent and street address is:

Pablo R. Bared, Esq. Bared and Assoc., PA 2950 SW 27th Avenue, Suite 100 Miami, Florida 33133

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 detties, and I amifamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608 [F.E.]

Paulo R. Bared, Esq. Registered Agent

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one operating manager and one manager.

Manager/Angel Junquera

ARTICLE V - EFFECTIVE DATE

The Limited Liability Company is effective de of November 10, 2011

Pablo R. Bared, Est, Authorized Representative for

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

TILED 11 NOV IL PH 4: 05 LECKETARY OF STATE LLAHASSEE, FLORIDA

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