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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

APPROVAL
AND
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SECRETARY OF STATE
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DIVISION OF CORPORATION
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LIMITED LIABILITY COMPANY

ICHIMAR, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

JB
10-9-09

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(8)

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

ICHIMAR, LLC

ARTICLE II - Address:

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

1120 S. Powerline Road,
Pompano Beach, Florida 33069

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

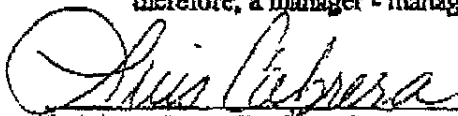
The name and the Florida street address of the registered agent are:

Luis M Cabrera
1120 S. Powerline Road,
Pompano Beach, FL 33069

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.

ARTICLE IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.



Luis M Cabrera, Registered Agent



Isabel Martinez, Member

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

Isabel Martinez

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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