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Requester's Name VAZQUEZ + HESS  
Address 601 Brickell Key Dr 802  
City/State/Zip Miami 33131 Phone #

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-01/11/00--01049--005  
\*\*\*125.00 \*\*\*125.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. TUARISTAS.COM LLC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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ARTICLES OF ORGANIZATION OF TUARTISTAS.COM, LLC

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — Name:**

The name of the Limited Liability Company is: **TUARTISTAS.COM, LLC**

**ARTICLE II — Address:**

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

601 Brickell Key Drive, Ste. 802, Miami, FL 33131

**ARTICLE III — Duration:**

The period of duration for the Limited Liability Company shall be: Perpetual

**ARTICLE IV — Management:**  
(Check the appropriate box and complete the statement)

- ☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:
- ☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member is:

Abraham Mendez  
601 Brickell Key Drive, Ste. 802  
Miami, Florida 33131

**ARTICLE V — Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be vested solely in Abraham Mendez.

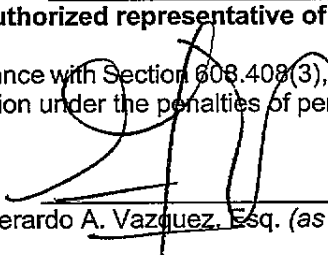
**ARTICLE VI — Members' Rights to Continue Business**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be determined by the votes of the majority of the members as of the date of specified event (as described herein).

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 5th day of January, 2000.

**Signature of an authorized representative of a member executing the Articles of Organization.**

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

  
Gerardo A. Vazquez, Esq. (as authorized representative of Abraham Mendez)

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE  
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO  
DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.**

1. The name of the Limited Liability Company is:

**TUARTISTAS.COM, LLC**

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

**Gerardo A. Vazquez, Esquire**  
(Name)

**601 Brickell Key Drive, Suite 802**  
Florida street address (P.O. Box **NOT** acceptable)

**Miami, Florida 33131**  
City/State/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.*

  
(Signature)

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**00 JAN 10 PM 3:51**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**