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Florida Department of State

Division of Corporations

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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**

LIMITED LIABILITY COMPANY

NEO I, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
NEO I, LLC

ARTICLE I

The name of the limited liability company shall be: NEO I, LLC

ARTICLE II

The principal place of business and mailing address of the corporation shall be:

3375 SW 3rd AVENUE
MIAMI, FLORIDA 33145

ARTICLE III

This limited liability company shall commence its existence immediately upon the filing of the Articles of Organization and shall perpetually thereafter be in existence unless sooner dissolved by and in accordance with Florida law.

ARTICLE IV

The name and address of the initial registered agent is:

LISSETTE CALDERON
3375 SW 3rd AVENUE
MIAMI, FLORIDA 33145

ARTICLE V

The limited liability company is to be managed by a managing member. The managing member of the company shall be LISSETTE CALDERON.

The undersigned has executed these Articles of Organization as incorporator on this 12 day of March 2002.


LISSETTE CALDERON

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

Pursuant to the provisions of Florida Statutes, the undersigned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

First that, NEO I, LLC desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization, has named LISSETTE CALDERON, whose address is 3375 SW 3rd AVENUE, MIAMI, FLORIDA 33145, as its agent to accept service of process within this State.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED CORPORATION 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 

Registered Agent

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