(Dao	
NDESAND TO ENTERPRI Requester's Name	SPS USA LLC
ILLI WEST READING	NAY
Address City/State/Zip Phone #	32789
	-06/11/0201034003 ****160.00 ****160.08
CORPORATION NAME(S) & DOCUM	Office Use Only IENT NUMBER(S), (if known):
1. 00189-0063-00 (Corporation Name)	1000000000000000000000000000000000000
2(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #) (Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Config. S
☐ Mail out ☐ Will wait	Photocopy Certificate States
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other
CR2E031(7/97)	Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 12, 2002

NDESANDJO ENTERPRISES USA LLC 161 WEST READING WAY WINTER PARK, FL 32789

SUBJECT: NDESANDJO ENTERPRISES USA LLC

Ref. Number: W02000017081

We have received your document for NDESANDJO ENTERPRISES USA LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 302A00038487

Michelle Hodges Document Specialist

850-4-10-1015

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NDESANDJO ENTERPRISES USA

The mailing address and street address of the principal office of the Limited Liability Company is: 161 WEST READING WAY, WINTER PARK, FL 32789

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

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

161 WEST READING WAY
Florida street address (P.O. Box NOT acceptable) WINTER PARK FL 32789
City, State, and Zin

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, P.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.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

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

MARK NDESANOTO
Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)