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P. 3

Division of Corporations

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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 : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (305) 673-0347  
Fax Number : (305) 532-0738

LIMITED LIABILITY COMPANY  
SUMMER SKY INVESTMENTS, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 0        |
| Page Count            | 012      |
| Estimated Charge      | \$130.00 |

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

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:  
**SUMMER SKY INVESTMENTS, LLC**

**ARTICLE II ADDRESS**

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

**15841 PINES BLVD. #323  
PEMBROKE PINES, FL 33027**

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

**STEPHEN LIN  
15841 PINES BLVD. #323  
PEMBROKE PINES, FL 33027**

Having been named as registered agent 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.

  
Registered Agent's Signature

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one member or more members and is, therefore, member - managed company.

**ARTICLE V MEMBERS (optional)**

Managing Member :  
**STEPHEN LIN  
15841 PINES BLVD. #323  
PEMBROKE PINES, FL 33027**

  
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 penalties of perjury that the facts stated herein are true.

**STEPHEN LIN**

Typed or printed name of signer

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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