

# L020000024465

Florida Department of State  
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To: Division of Corporations  
Fax Number : (850) 205-0383

From: Account Name : DAVID J. HART, P.A.  
Account Number : I19990000143  
Phone : (305) 577-9977  
Fax Number : (305) 577-0095

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## LIMITED LIABILITY COMPANY

SBCIdiomias, LLC

Certificate of Status	0
Certified Copy	1
Page Count	0 3
Estimated Charge	\$155.00

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Articles of Organization  
of  
SBCIdiomias, LLC

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida do set forth the following:

Article I  
Name

The name of the Limited Liability Company shall be:

SBCIdiomias, LLC

Article II  
Principal Place of Business and Mailing Address

The principal place of business and the mailing address of this Limited Liability Company shall be:

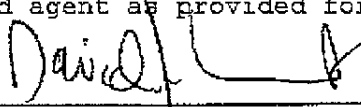
21 S.E. 1 Avenue, 10<sup>th</sup> Floor  
Miami, FL 33131

Article III  
Initial Registered Agent and Street Address

The name and street address of the initial registered agent is:

David J. Hart, Esq.  
21 S.E. 1 Avenue, 10<sup>th</sup> Floor  
Miami, FL 33131


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 such 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 508, F.S.

  
\_\_\_\_\_  
David J. Hart, Esq.  
Registered Agent's Signature

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Article IV  
Management

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

  
\_\_\_\_\_  
Susana B. Carlino  
Member

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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