Division of Corporations

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Florida Department of State

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To:

Division of Corporations

: (850)205-0383 Fax Number

From:

Account Name : BERRIZ & GIRALDO P.A.

Account Number: Il9990000017 Phone : (305)485-9300 Fax Number : (305)485~1098

LIMITED LIABILITY COMPANY

TO THE RESIDENCE OF THE PROPERTY OF THE PROPER

AIM FINANCIAL, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

JIVISION OF CORPORATION

H03 000 221 5744.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILIT COMPANY

OF

AIM FINANCIAL, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

AIM FINANCIAL, LLC.

ARTICLE II - ADDRESS

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

787 VILLA PORTOFINO CIRCLE
DEERFIELD BEACH, FL. 33442

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

JOHN A. SULLIVAN Name

787 VILLA PORTOFINO CIRCLE
Florida street address (P.O.BOX NOT acceptable)

DEERFIELD BEACH, FL. 33442

City, State, and Zip

YOHIMA DEL CORRAL 4080 SW 84 AV MIAMI, FL 33155 305-4859300 Ho3 000 2215744.

Hos 0002215744

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, F.S..

REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

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

JOHN A. SULLIVAN 787 VILLA PORTOFINO CIRCLE DEERFIELD BEACH, FL. 33442 MANAGER

MANAGER

MICHAEL PETTO 2789 CARAMBOLA CIRCLE SOUTH COCONUT CREEK, FL. 33066

(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 penalties of perjury that the facts stated herein are true.)

JOHN A. SULLIVAN
Typed or printed name of signee

HO3 000 2215744.