

# L03 0000 25313

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 : 072430003255  
Phone : (305)634-3694  
Fax Number : (305)633-9696

**LIMITED LIABILITY COMPANY**

**polaris services, l.l.c.**

Certificate of Status	0
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ARTICLES OF ORGANIZATION

FOR

POLARIS SERVICES, L.L.C.

ARTICLE I

NAME

The name of this Limited Liability Company is:

POLARIS SERVICES, L.L.C.

ARTICLE II

ADDRESS

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

4085 Poinciana Avenue  
Miami, Florida 33133

ARTICLE III

DURATION

Beginning on the date these Articles of Organization are filed with the Florida Department of State, the period of the Company's duration shall be perpetual, unless terminated by the unanimous written agreement of all members or by the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or upon the occurrence of any other event which terminates the continued membership of a member, unless the business of the company is continued by the consent of all the remaining members, or by amendment of these Articles of Organization providing for the continued existence of the Company subsequent to the foregoing events.

This instrument prepared by Sukkar, Arevalo & Associates  
Attorney at Law, Florida Bar #0717691.  
Address: 2432 Hollywood Blvd., Hollywood, Florida 33020

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**ARTICLE IV**

**MANAGEMENT**

The Limited Liability Company is to be managed by the member, whose name and address is:

**NAME**

**ADDRESS**

Oscar Peña

4085 Poinciana Avenue  
Miami, Florida 33133

  
Oscar Peña

**CERTIFICATION OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA.

1. The name of the limited liability company is Polaris Liability, L.L.C.
2. The name and address of the registered agent and office is:

Oscar Peña  
4085 Poinciana Avenue  
Miami, Florida 33133

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.

  
Oscar Peña

7/10/03  
Date

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