

**L03 000049952**

Florida Department of State  
Division of Corporations  
Public Access System

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TALLAHASSEE, FLORIDA

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

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

DIVISION OF CORPORATION

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**LIMITED LIABILITY COMPANY**

**neo technology group, llc**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

**L03-49952**  
*[Signature]*

(3)

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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NEO TECHNOLOGY GROUP, LLC

ARTICLE II - Address:

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

Principal Office Address:

9388 N.W. 50 DORAL CIRCLE NORTH

MIAMI, FLORIDA 33178

Mailing Address:

SAME

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TALLAHASSEE, FLORIDA

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

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

JOSE R. PUJOLS, ESQ.

Name

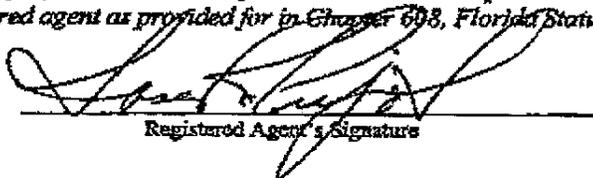
2701 S. LEJEUNE ROAD, SUITE 401

Florida street address (P.O. Box NOT acceptable)

CORAL GABLES, FLORIDA 33184

City, State, and Zip

*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, Florida Statutes.*

  
Registered Agent's Signature

Page 1 of 2  
(CONTINUED)

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TOTAL P.03

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**ARTICLE IV- Manager(s) or Managing Member(s):**  
The name and address of each Manager or Managing Member is as follows:

**Title:**  
"MGR" = Manager  
"MGRM" = Managing Member

**Name and Address:**

MEMBER

CARLOS HERNAN MARINA  
9886 N.W. DORAL CIRCLE NORTH  
MIAMI, FLORIDA 33178

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TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

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.)

JOSE R. PUJOLS, ESQ.

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)

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