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TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Silliopaireming LC (Name of Limited Liability Company)	
(Name of Emiliary Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Christian A. Kelch	
Billiangineminds LLC	
(Firm/Company)	
(Firm/Company) Cent Gr	
2385 Executive Dr. suite 10	0
(Address)	
Soca Raton, +L 3343	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Jimma Echavarria = 501 , 632-2881	
(Name of Person) (Area Code & Daytime Telephone Number)	

STREET ADDRESS:

r-3

TO:

Registration Section

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Billiungire minos, LLC.	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: 3385 Executive Conter Dr. Suiteloo 2385 Executive Conter Dr. Boca Roton, FL. 33431 Boca Roton, Fl. 33431	ide ide
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Chaptian A	
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)

The name and address of each Manager or Managing Member is as follows:		
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Christian A. Kelch 545 N. W. 4th. AVE Devices George Fl. 33444	
MGRM	ED Sharand Raisk Palms Way # 103	
MGRM	Jimmy A. Echavarria 4941 Jahler Dr. #0 W. D.B. FL 33417	
(Use attachment if necessary)		
NOTE: An additional article must be REQUIRED SIGNATURE.	added if an effective date is requested.	
Signature of a member or an au	thorized representative of a member.	
(In accordance with section 608.4 of this document constitutes an all that the facts stated herein are true to the facts of the facts o	. Kelch	

ARTICLE IV-Manager(s) or Managing Member(s):

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)