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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 : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

aim ventures, llc

Certificate of Status	0
Certified Copy	0
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04 JUL 15 PM 3:45  
DIVISION OF CORPORATION

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

AIM Ventures, LLC

**Article II - Address:**

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

Principal Office Address:

Mailing Address:

5201 Blue Lagoon Dr  
8th Floor  
Miami, FL 33126

SAME

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

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

Alexander Barrios  
Name

5201 Blue Lagoon Dr, 8th Floor  
Florida street address (P.O. Box Not acceptable)

Miami, FL 33126  
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, F.S..

[Signature]  
Registered Agent's Signature

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**ARTICLE IV - Management / Member(s):**

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Alexander Barrios  
501 Blue Laguna Dr., #100  
Miami, FL 33126

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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 808.406(3), Florida Statutes,  
the execution of this document constitutes an affirmation under  
the penalties of perjury that the facts stated herein are true.)

Alexander Barrios  
Typed or printed name of signer

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