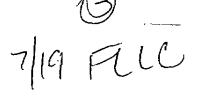
sivision of Corporations



## Florida Department of State **Division of Corporations** Public Access System

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To:

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

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 Fax Number : (305)716-0346

PM 2: 30 JIVISION OF

## LIMITED LIABILITY COMPANY ADVOCATE VISUAL AND DATA SYSTEMS, LLC

Certificate of Status	0
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1. – NAME

The name of the Limited Liability Company is ADVOCATE VISUAL AND DATA SYSTEMS, LLC

ARTICLE 2. - ADDRESS

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

245 SW 28<sup>th</sup> Rd. Miami, Florida 33129

ARTICLE 3. - REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

Roberto Hemandez 245 SW 28<sup>th</sup> Rd. Miami, Florida 33129

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 any position as registered agent as provided for in Chapter 608 F.S.

Registéred 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

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 penalties of perjury that the facts stated herein are true)

ROBERTO HERNANDEZ
Typed or printed name of signee