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

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

GUSLINK, LLC

Certificate of Status	0
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J. SWAN FEB - 1 2005

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is GUSLINK, LLC

ARTICLE II - Address

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

15998 SW 137th Avenue, Miami, FL 33177

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

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

Raul Gastesi, Jr., Esq.
Gastesi & Associates, P.A.
8105 N.W. 155th Street
Miami Lakes, FL 33016

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.



Registered Agent's Signature

ARTICLE IV - Management

☒ The Limited Liability Company is to be managed by two (2) managers and is, therefore, a manager - managed company.



RICARDO ECHEVERRIA



YVETTA ALAM ECHEVERRIA

(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.)

RICARDO ECHEVERRIA
Printed Name

(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.)

YVETTA ALAM ECHEVERRIA
Printed Name