# 05000012587 Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number

: (850)205-0383

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

Fax Number

: (305)634-3694 : (305)633-9696

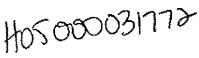
### LIMITED LIABILITY COMPAN

### innovative builders, llc

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#### ARTICLES OF ORGANIZATION

#### FOR

#### INNOVATIVE BUILDERS, LLC

#### ARTICLE I. - NAME:

The name of this Limited Liability Company ("Company") shall be:

#### INNOVATIVE BUILDERS, LLC

#### ARTICIE IL - ADDRESS

The mailing address and street address of the Company is: 1550 Madruga Avenue, Suite 208, Coral Gables, Florida 33146.

#### ARTICLE III. - DURATION

The period of duration for the Company shall be perpetual upless dissolved according to law.

#### ARTICLE IV. - MANAGEMENT

The Company is to be managed by: a manager or managers and the name(s) and address of such manager is:

Manuel R. Liano 1550 Madruga Avenue, Suite 208 Corel Gables, Florida 33146

#### ARTICLE V. - ADMISSION OF ADDITIONAL MEMBERS

The right of the members to admit additional members and the terms and conditions of the admissions shall be: new members may be admitted from time to time and upon such terms and conditions as shall be determined by a manimous vote of the holders of all of the demonstration interests.

#### ARTICLE VI. - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right of the members of the Company to continue the business on the death retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any fifther eyent which terminates the continual membership of a member in the Company shall be: determined by a unanimous vote of the remaining holders of all of the Membership Interests to continue to conduct the business of the Company under the Company's name.

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Signature of a member or an authorized representative of a member

(in accordance with sortion 602.402(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: INNOVATIVE BUILDERS, LLC
- The name and the Florida street address of the registered agent are;

### MANUEL R. LLANO

NAM

1550 Machrum Avenue, Sinte 208 Coral Gables, Florida 33146
Florida succi address

Having been named as registered ogent and to accept service of process for the obave mated limited liability company at the place designated in this certificate. I hereby accept the appairment 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.

Jac ( c \_ signature

SECRETARY OF STATE

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