

Division of Corporations

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LIMITED LIABILITY COMPANY

HELM SYSTEMS, LLC

Certificate of Status	1
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**ARTICLES OF ORGANIZATION
OF HELM Systems, LLC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I

NAME

The name of the Limited Liability Company is **HELM Systems, LLC**.

ARTICLE II

ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 9021 SW 122 Avenue, Apartment 209, Miami, Florida 33186.

ARTICLE III

REGISTERED AGENT AND REGISTERED OFFICE

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

Eduardo R. Arista, Esq.
515 Gables International Plaza
2655 South Le Jeune Road
Coral Gables, Florida 33134

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 20th day of May, 2005.



Eduardo R. Arista, Esq., Authorized Representative of a Member

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STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for Helm Systems, LLC at the place designated in Article III above. 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 under Chapter 608, Florida Statutes.



Eduardo R. Arista, Esq., Registered Agent

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