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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  
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Phone : (305) 634-3694  
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**LIMITED LIABILITY COMPANY**

**solution investments group llc**

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY OF  
SOLUTION INVESTMENTS GROUP LLC**

**ARTICLE I**

The name of the Limited Liability Company shall: SOLUTION INVESTMENTS GROUP LLC

**ARTICLE II**

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

**ARTICLE III**

The mailing address and street address of the principal office of the Limited Liability Company is: 4801 S. UNIVERSITY DRIVE, SUITE 111, DAVIE, FL 33328.

**ARTICLE IV**

The name of the Managing Member(s) for this company shall be:

**Managing Member**  
MARISOL GUTIERREZ

**ARTICLE V**

The name and the Florida street address of the registered agent: HECTOR M. GUTIERREZ, 4801 S. UNIVERSITY DRIVE, SUITE 111, DAVIE, FL 33328.

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED  
OFFICE/MEMBER/REPRESENTATIVE**

Solution Investments Group, LLC  
(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

J. Hector M. Martinez  
Registered Agent

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[Signature]  
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 the penalties of perjury that the facts stated herein are true.)

Andree Jara  
Typed or printed name of signer

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