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CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. VM Proportion Name)	Maux gement of A	Vainte vance 26
2. (Corporation Name)	(Document #)	SA S
3. (Corporation Name)	(Document #)	AUG -3 MIII: 24
(Corporation Name)	(Document #)	PZ
Walk in Pick up time Mail out Will wait		Certified Copy Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	TA _S
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Off Change of Registered Ag Dissolution/Withdrawal Merger	gent SSEE
OTHER FILINGS	REGISTRATION/QUALIF	FLORIN OS
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	

Examiner's Initials

ARTICLE I - Name: The name of the Limited Liability Company is: M Proper fils MANAGE MENT & MAINTENAME ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Mailing Address: 11730 SW 190 Terrace Miani F. 33177 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Vidal M. Martin E2

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.,

11730 Sw 190 Terrace
Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM_	Vidal M. Martinez 11730 Sw 90 Terrace Miami Fr 33177
 . ***	
(Use attachment if necessary)	

NOTE: An additional article must be added if an effective date is requested.

REQUIRED 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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)