Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

TAIL TO PERSONAL

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000201351 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305) 634-3694

Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

solaris friends, llc

FAL

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electropic Filipo, Manu.

EMP I RE

UNC-55-5002 16:48



HOSO0020 1351 7 :1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

83 322 m 9:14

SOLARIS FRIENDS, LLC

TALL THE THIRD A

ARTICLE I

The name of the Limited Liability Company shall: SOLARIS FRIENDS, 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: 9737 NW 41st STREET, #615, MIAMI, FL 33178-2924

ARTICLE IV

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

Managing Member

LUIGI DI GIROLAMO

10556 NW 26th STREET

SUITE D-101

DORAL, FL 33172

Managing Member

SERAFINO PIZZUTI

10556 NW 26th STREET

SUITE D-101

DORAL, FL 33172

Managing Member

MARCOS PERDOMO

10556 NW 26th STREET

SUITE D-101

DORAL, FL 33172

ARTICLE V

The name and the Florida street address of the registered agent: CABANAS & ASSOCIATES, P.A., 10520 NW 26th STREET, SUITE C-201, DORAL, FL 33172

H05000201351

E0.9 JATOT

HOSOU0201351

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

65 13 22 A 9 14

mil no some

SOLARIS FRIENDS, LLC

(Name of Company)

Having been name 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.

CABANAS & ASSOCIATES, P.A.

Rogistered Agent

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.)

JOSEPH F. CABANAS

Typed or Printed Name of Signee

H05000201351