

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC. Account Number : 071.001002335

Phone : (305)599-0839

Fax Number

: (305)716-0346

M M M HOMES LLC

Certificate of Status	0
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is	<b>;</b> :	
M M M HOMES LLC		
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:	
Principal Office Address:	Malling Address:	
3137 W 77 PL HIALEAH PL 33016	SAME	
HIALEAH FL 33016	AHASSE FLORIDA  TERM (F.O. Box NOT ecceptable)	
City, State, an	nđ Zip	

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.

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(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows. Title Name and Address: "MOR" - Manager "MGRM" = Managing Member MIGUEL E RODRIGUEZ MGR 3137 W 77 PL HIALEAH FL 33016 MGRM FRANCISCO DE LA MONEDA 3660 N SAN SEBASTIAN OR TUCSON AZ 85750 MIGUEL A RODRIGUEZ MGRM 14128 LILLY OF WELLINGTON FL 33414 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE:

(In soundance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjuny that the facts stated harein are true.)

Typed or printed name of signes

MIGUEL E RODRIGUEZ

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