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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA, F.A.

Account Number: 076624003440 Phone: (305)444-6226

Fax Number : (305)442-4829

LIMITED LIABILITY COMPANY

GOENAGA INVESTMENTS, LLC.

Certificate of Status	1
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### ARTICLES OF ORGANIZATION

OF.

#### GOENAGA INVESTMENTS, LLC.

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SEUM TAKY A STATE
TALLAHASSEE FLORIDA

The undersigned metabers to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

### ARTICLE I NAME

The name of this Limited Liability Company is: GOENAGA INVESTMENTS, LLC.

## ARTICLE II GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

## ARTICLE III TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

#### ARTICLE IV

The principal office and mailing address of this Limited Liability Company in the State of Florida is 7707 NW 103 STREET, FIIALEAH GARDENS, FL 33016. The Board of Managers may from time to time move the principal office to another address in Florida.

# ARTICLE V REGISTERED OFFICE. REGISTERED AGENT

That GOENAGA IN VESTMENTS, LLC., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates ARAZOZA & FERNANDEZ-FRAGA, P.A., as its Registered Agent to

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accept services within the State. The registered office of the Limited Liability Company shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134.

## ARTICLE VI MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The initial Manager shall be NIURKA GOENAGA, of 7707 NW 103 STREET, HIALEAH GARDENS, FL 33016.

WITNESS the hand and seal of the manager in M	fiami-Dade County, State of Florida, this $\underline{\it Ub}$
day of October, 2005.	1
	1, 9,
	NIURKA GOENAGA
	THOIGHT OCTUBORS

STATE OF FLORIDA ) SS:	
COUNTY OF MIAMI-DADE )	
PERSONALLY appeared before me, NIURKA GOENAGA, as sole Manager of produced FL. Manual as identification or is personally known.	to me, who being
by me first duly sworn, acknowledges that she signed the same for the purposes t	herein expressed.
WITNESS my hand and scal at Miami-Dade County, Florida this 100 th day	of October, 2005.
Laura Kohn Cmanission #DD319617 Expires: May 16, 2008 Bonded Thru tiantic Bonding Co., Inc. AT LARGE	LORIDA

My commission expires:

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That GOENAGA INVESTMENTS, LLC., desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, has named ARAZOZA & FERNANDEZ-FRAGA, P.A., as its Agent, of 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134, to accept service of process within Florida.

Having beer, named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Registered Agent

CARLOS F. ARAZOZA

Managing Director

Arazoza & Fernandez-Fraga, P.A.

Date: October \_\_\_\_\_ 2005