L05000109844

| (Requestor's Name) | | | | |
|--------------------------|-----------------|-----------|--|--|
| | | | | |
| (Address) | | | | |
| | | | | |
| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| | | | | |
| Certified Copies | _ Certificates | of Status | | |
| | | | | |
| Special Instructions to | Filing Officer: | A Company | | |
| | | 1//2/ | | |
| | | ` | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only

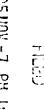


400061181664

11/07/05--01062 -- 014 **125.00



SECHLANDER BO



COVER LETTER

| TO: Registration Se Division of Co | | | |
|---|---|---|--|
| SUBJECT: Levelfour Americas, LLC | | | |
| | | ed Liability Company) | |
| The enclosed Articles of | f Organization and fee(s) are s | submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | | | |
| Jorge A. Fernandez | | | |
| | (| (Name of Person) | |
| Levelfour Americas, LLC | | | |
| (Firm/Company) | | | |
| 12205 SW 132 Court | | | |
| | | (Address) | |
| | <u></u> | Florida 33186-6 | 479 |
| (City/State and Zip Code) | | | |
| For further information | concerning this matter, please | call: | |
| Jorge A. Fernandez | | at (305) 385-30 | 00 |
| | of Person) | (Area Code & Daytime To | elephone Number) |
| Enclosed is a check for | or the following amount: | | |
| \$125.00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tellahassee, FL 32301 | ns Circle |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | EFFECTIVE DATE |
|---|--|
| Levelfour Americas, LLC (Must end with the words "Limited Liability Company, "Limited | d Company" or their abbreviation "LLC," or "L.C.,") |
| ARTICLE II - Address: The mailing address and street address of the pri | ncipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 12205 SW 132 Court Miami, Florida 33186-6479 | Same |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re Jorge A. Fernan | ered Agent. You must designate an individual or another egistered agent are: |
| - 1 | TALE |
| 12205 SW 13 Florida street add | 2 Court Press (P.O. Box NOT acceptable) |
| Miami | W 33186-6479 |
| City, State, a | |
| liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per | ccept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S |

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Jorge Fernandez 11150 SW 160th Court Miami, Florida 33196 MGR Nigel Walsh London, England (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: November 1, 2005 ____. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Jorge A. Fernandez

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)