

L060000011768

Florida Department of State
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DIVISION OF CORPORATIONS

Counter

To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002333
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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FLORIDA/FOREIGN LIMITED LIABILITY CO

RML LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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TALLAHASSEE FLORIDA

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Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
RML LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

117 NE 95 Street

Miami Shores, FL 33138

Mailing Address:

SAME

ARTICLE III - Registered Agent, Registered office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

LEROY A. LLERA

Name

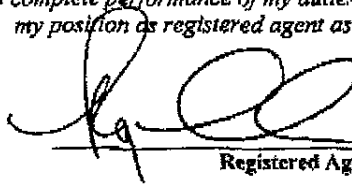
117 NE 95 ST

Florida street address (P.O. Box **NOT** acceptable)

MIAMI SHORES, FL 33138

City, State, and Zip Code

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.



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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Leroy A. Llera

117 NE 95 ST

Miami Shores, FL 33138

MGRM

Yenizet Hernandez

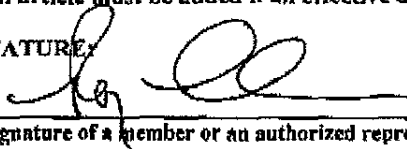
117 NE 95 ST

Miami Shores, FL 33138

(Use attachment is 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.)

Leroy A. Llera

Typed or printed name of signer

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