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COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Lourdes Nunez, L.L.C. (Name of Limited Liability Company) |
| The enclosed Articles of Organization and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Lourdes Nunez |
| (Name of Person) |
| · |
| (Firm/Company) |
| 3015 N. Ocean Blud, apt 15J |
| (Address) |
| Fort Landerdale FL 33308. |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| · · · · · · · · · · · · · · · · · · · |
| (Name of Person) at (954) 588-9335 (Area Code & Daytime Telephone Number) |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee \& Certificate of Status \$\bigcup \\$ Certified Copy (additional copy is enclosed) \$\bigcup \\$ Certified Copy (additional copy is enclosed) |
| Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Clifton Building Tallahassee, FL 32301 Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32301 |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

| Lourdes Nunez L.L.C. (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,") |
|---|
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is |
| Principal Office Address: Mailing Address: |
| 3015 N. Ogan Blud. Same Suite 15.J. |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) |
| The name and the Florida street address of the registered agent are: |
| Lourdes Nunez Son Son |
| The second second |
| 3015 N. Ocean Blud. Florida street address (P.O. Box NOT acceptable) |
| Florida street address (P.O. Box NOT acceptable) |
| Florida street address (P.O. Box NOT acceptable) FH. Landudale FL 33308 City, State, and Zip |
| Barana Baran |
| 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 al 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) Page 1 of 2

| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
|---|--|
| mgrm | Loundes Nunez 3015 N. Ocean Blud. apt 15 FORT Landerdule FL 33308 |
| | |
| | |
| (Use attachment if necessary) | |
| , | |
| CLE V: Effective date, if other than effective date is listed, the date mu | the date of filing: (OPTIONA st be specific and cannot be more than five business day |
| CLE V: Effective date, if other than effective date is listed, the date mu | the date of filing: (OPTIONA ist be specific and cannot be more than five business day |
| CLE V: Effective date, if other than effective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: | the date of filing: (OPTIONAl st be specific and cannot be more than five business day when the specific and cannot be more than five business day when the specific and cannot be more than five business day when the specific and cannot be more than five business day when the specific and cannot be more than five business day when the specific and cannot be more than five business day when the specific and cannot be more than five business day when the specific and cannot be more than five business day when the specific and cannot be more than five business day when the specific and cannot be more than five business day when the specific and cannot be more than five business day and the specific and cannot be more than five business day when the specific and cannot be more than five business day and the specific and cannot be more than five business day and the specific and cannot be more than the specific and the specif |

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)