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Division of Corporations

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Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : 120010000247 Phone

: (800) 494-3124

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

GOLDEN GROUP INVESTMENT, LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

GOLDEN GROUP INVESTMENT, LLC

ARTICLE II ADDRESS

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

5510 SW 147TH CT. MIAMI FL 33185

ARTICLE III REGISTERED AGENT. REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

RODRIGO JUSTINIANO 5510 SW 147TH CT. MIAMI FL 33185

Having been named as registered agent 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

RODRIGO JUSTIN/ANO/ Registered Agent's Signature

<u>ARTICLE IV MANAGEMENT</u>

The Limited Liability Company will be managed by one or more managing members and is, therefore, a Member Managed Company.

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ARTICLE V

The name(s) and address(es) of the managing members of the LLC are:

RODRIGO JUSTINIANO

MANAGING MEMBER: 5510 SW 147TH CT.

MIAMI FL 33185

MARIA A. JUSTINIANO

MANAGING MEMBER: 355 S BISCAYNE BLVD. #4001

MIAMI FL 33131

OSCAR M. JUSTINIANO

MANAGING MEMBER: 355 S BISCAYNE BLVD. #4001

MIAMI FL 33131

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.)

RODRIGO JUSTINIANO
Typed or printed name of signee

SECRETARY OF STATE ALLAHASSFF FLORINA