

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

Andrew Archenge of the Mile of the Control of the C

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694 : (305)633-9696 Fax Number

DRIDA/FOREIGN LIMITED LIABILITY CO.

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ARTICLES OF ORGANIZATION OF A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-NAME

The name of the Limited Liability Company is:

A TOUCH OF CLASS LLC

ARTICLE II-ADDRESS:

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

PRINCIPAL OFFICE ADDRESS:

MAILING ADDRESS:

5403 NW 94 TERRACE SUNRISE FL 33351 5498 NW 94 TERRACE SUNRISE FL 33351

ARTICLE III- REGISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE: The name and the Florida street address of the registered agent are:

PEDRO ONDARROA

5498 NW 94 TERRACE FLORIDA STREET ADDRESS (P.O BOX NOT ACCEPTABLE)

> SUNRISE, FL 33351 CITY, STATE, AND ZIP

6 JUN 16 AM 10: 43 SECRETARY OF STATE ALLAHASSEE FLORIDA

APPECVED

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS 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 FURTHERAGREE TO COMPLY WITH THE PROVISIONS OF ALL. STATUTES RELATING TO THE PROPER AND COMPLETE PERFUMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ALICEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS PROVIDED FOR IN CHAPTER 608, F.S.

REGISTERED AGENT SIGNATURE

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ARTICLE IV-MANAGEMENT/MEMBER(S):

The name(s) and address (es) of each Manager or Managing Member is as follows:

MGR= Manager
MGRM= Managing Member

MGR= PEDRO ONDARROA, 5498 NW 94 TERRACE, SUNRISE P1. 33351

MGR= YUMELY ORTIZ, 5498 NW 94 TERRACE. SUNRISE FL 33351

(Use attachment if 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 wide section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated berein are leue.)

PEDRO ONDARROA

Typed at printed name of signed

ECRETARY OF ST

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APPROVED AND

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