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# EXPRESS CORPORATE FILING SERVICE INC. Requestor's Name 1000 PONCE DE LEON BLVD. SUITE:101 Address (305) 444-4994 CORAL GABLES, FL 33134 City/State/Zip Phone # OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) (Corporation Name) (Document #) Pick up time Certified Copy Certificate of Status ■ Mail out Will wait Photocopy NEW FILINGS AMENDMENTS. Profit Amendment NonProfit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/ OTHER FILNGS QUALIFICATION Annual Report Foreign **Fictitious Name**

Limited Partnership

Examiner's Initials

Reinstatement Trademark

Other

CR2E031(9/92)

Name Reservation

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE 1 - Name: The name of the Limited Liability Company is:	ORIDA LIMITED LIABILITY COMPANY	
SUUNTO, LLC (Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1321 ALTON RD MIAMI BEACH, FL 33139	1321 ALTON RD MIAMI BEACH, FL 33139	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another egistered agent are:	
ALEXANDER FERNAND	<u>EZ</u> _	
Name		
1321 ALTON RD		
Florida street add	ress (P.O. Box NOT acceptable)	
MIAMI BEACH City, State, a.	_FL 33139 nd Zip	
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	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S	
	,	

(CONTINUED)
Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	ALEXANDER FERNANDEZ  1321 ALTON RD  MIAMI BEACH, FL 33139
(Use attachment if necessary)	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTIONAL be specific and cannot be more than five business days
o days after the date of filling.	

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.)

### ALEXANDER 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)