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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE VALUABLESSEE. PLORIDA

COVER LETTER

.....

TO: Registration Division of	n Section Corporations	
CUDIFCT.	KIKAZOOM DENO	2, LLC
SUBJECT:	(Name of Limite	ed Liability Company)
The enclosed Article	es of Organization and fee(s) are	submitted for filing.
Please return all con	respondence concerning this matt	er to the following:
	Gu	illermo J. Arguello
		(Name of Person)
	MMM	Wireless Corporation
		(Firm/Company)
	169 East I	Flagler Street, Ste. 702
		(Address)
	Miami,	, Florida 33131
	(Cit	y/State and Zip Code)
For further informat	ion concerning this matter, please	call: at (Area Code & Daytime Telephone Number)
Guillerr	mo J. Arguello	at (305) 403-4108 Ext. 2 프유
(N	ame of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a chec	k for the following amount:	- 10
☐ \$125.00 Filing F	ee S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ed Company" or their abbreviation "LLC," or "L.C.,")	
ringing office of the Limited Lighility Company is	9.
morphic of the Elimica Elability Company is	J.
Mailing Address:	
169 East Flagler Street, Ste. 702	
	-
I Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another teres agent are:	07.18W 17
leno "P = "	יבנו
707 1507	
Street #2102	
dress (P.O. Box NOT acceptable)	
_{E1} 33131	
and Zip	
accept service of process for the above stated limite this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of a performance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S	ıll
	Miami, Florida 33131 Office, & Registered Agent's Signature: iered Agent. You must designate an individual or another content agent are: eno Street #2102 Iress (P.O. Box NOT acceptable) FL 33131 and Zip accept service of process for the above stated limite this certificate, I hereby accept the appointment as as a further agree to comply with the provisions of a process for my duties, and I am familiar with analysis and I am familiar with analysis.

(CONTINUED)
Page 1 of 2

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

The management of the limited liability company is reserved for the Members.

The name and address of the member of the Limited Liability Company is:

Managing Member – MMM Wireless Corporation 169 East Flagler Street, Ste. 702 Miami, Florida 33131

ARTICLE V - Duration:

The duration of the Limited Liability Company shall be: 12/31/2046.

SIGNATURE:

Signature of a member of an authorized representative of a member

(In accordance with section 608.408(3) of the Florida Statutes, the execution of this document constitutes an affirmation under the copenalty of perjury that the facts stated herein are true.)

Typed or printed name of signee