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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : BERRIZ & GIRALDO P.A.

Account Number : 119990000017 Phone : (305)485-9300

Fax Number : (305)485-1098

FLORIDA/FOREIGN LIMITED LIABILITY CO.

MYHUBTV, LLC.

Certificate of Status	1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILIT COMPANY

OF

MYHUBTV, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

MYHUBTV, LLC.

ARTICLE II - ADDRESS

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

15190 SW 136 ST SUITE # 6 MIAMI, FL. 33196

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

CARLOS L. DEL AMO

15190 SW 136 ST SUITE # 6

Florida street address (P.O.BOX NOT acceptable)

MIAMI, FL. 33196 City, State, and Zip

BERRIZ & GIRALDO P.A. 4080 SW 84 AVE SUITE C MIAMI, FL 33155 (305) 485-9300 H070000258873

MAN MARKETS

9 B.

1,655 1,767 (6)705

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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 all 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..

REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

CARLOSL, DEL AMO 15190 SW 136 ST SUITE # 6 MIAMI, FL, 33196

MANAGER

GLORIA ARENAS 15190 SW 136 ST SUITE # 6 R MIAMI, FL. 33196. MANAGER

HECTOR ARENAS 15190 SW 136 ST SUITE # 6 MIAMI, FL., 33196

MANAGER

GISELLE ALICIA BARO DEL AMO 15190 SW 136 ST SUITE # 6 MIAMI, FL. 33196

MANAGER

(An additional/article must be added if an effective date is requested)

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.)

CARLOS L. DEL AMO
Typed or printed name of signee

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