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SECRETARY OF STATE
STALLAHASSEE, FLORIDA

TO ACKNOWLEDGE SUFFICIENCY OF FILING

DEPARTMENT OF STATE DIVISION OF CORPORATION 2: 1

LAZARUS CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552	-5973	
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CORPORATION NAME(S) & DOC	UMEÑT NUMBER(S)	, (if known):
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(Corporation Name)	(Document #)	
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Walk in Pick up time	2.00	Certified Copy
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NEW FILINGS	AMENDMENTS	<u>.</u>
Profit Not for Profit Limited Liability Domestication Other		of R.A., Officer/Director egistered Agent Withdrawal
OTHER FILINGS	REGISTRATIO	N/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Parts Reinstatemen Trademark Other	
CR2E031(7/97)		Examiner's Initials



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3000 SW 128 AVE	SAME
MIGMI PC 33175	
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 reg	gistered agent are:
\Tvan \T.	Stefano Es E
Name	TAK ASS
3000 50	U 128 Ave SSEE P
Florida street addre	
Miami	FL 33175 STEEL 33175
City, State, an	d 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 perj	scept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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	Name and Address:
"MGRM" = Managing Member MGRM MGRM MGRM	Juan V. Sterano 3000 5W 128 400 MIA. A. 33175 Leslie C. Sterano 3000 5W 128 400 MIA. A. 33175
(Use attachment if necessary) ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must b to or 90 days after the date of filing.)	e date of filing: (OPTIONAL) e specific and cannot be more than five business days prior
(In accordance with see of this document const that the facts stated h	er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury herein are true.) Solve Declaro

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)