Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name

: A 1 A CORPORATE SERVICES, INC.

Account Number: I20010000247 Phone

: (800)494-3124

Fax Number

: (305) 675-2811

Morel De Guiramond, Architecture, LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

MOREL DE GUIRAMOND, ARCHITECTURE, LLC

ARTICLE II: Address

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

400 MANGROVE POINT

JUPITER FLORIDA 33458

ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTER AGENT SIGNATURE

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

A1A REGISTERED AGENT INC.

92 SADBERRY ROAD

QUINCY, FLORIDA 32351

Having been named as registered agent 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.

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MOREL DE GUIRAMOND, ARCHITECTURE, LLC

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V: MEMBERS (optional)

MANAGING MEMBER:

MICHAEL MOREL 400 MANGROVE POINT JUPITER FLORIDA 33458

MANAGING MEMBER:

JOANN MOREL
400 MANGROVE POINT
JUPITER FLORIDA 33458

SECRETARY OF STATE TALLAHASSEE, FLORID



Signature of a member or an authorized representative of a member

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

MICHAEL MOREL