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COVER LETTER

TO: Registration S Division of Co		•		
SUBJECT:	MLS LL(ed Liability Company)		•
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.		
Please return all corresp	pondence concerning this matte	er to the following:		
	Luis a.	CINTRON (Name of Person)		
	MLS, LI	(Firm/Company)		-
	3301 Gran	Ave. #)	TALL SECTION	O7 APR
	MIAM!, FL	33133 (State and Zip Code)	HASSE!!	7 APR -3 AM 11: 27
For further information	concerning this matter, please	call:	FLORIDA	1:27
Samur	Nadkarni e of Person)	at (305) 444 - (Area Code & Daytime Te	- 4848 lephone Number)	
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section	Street/Courier Address Registration Section		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:
The name and the Florida street address of the registered agent are: Luis Cintrol Name
12 Alfranbra Circle #16
Florida street address (P.O. Box NOT acceptable) Coral Gables FL 33134 City, State, and Zip
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 Signapole (REQUIRED)

(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	Name and Address:			
"MGRM" = Managing Member MGR	Samir Nackarni 3301 Grand Ave. #D			
MGR	Luis Co. Cintion 12 Athanbra Circle # 16 Coral Gables, FL 33134			
	TAPR -3 A			
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing:				
REQUIRED SIGNATURE:				

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.)

Luis 6 Contro

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)