

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : BERRIZ & GIRALDO P.A.
Account Number : I19990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.**GAMEZ INVESTMENT & MANAGEMENT, LLC.**

Certificate of Status	1
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF**

GAMEZ INVESTMENT & MANAGEMENT, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

GAMEZ INVESTMENT & MANAGEMENT, LLC.

ARTICLE II - ADDRESS

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

**9456 SW 154 PL
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:

SAMUEL E. GAMEZ

9456 SW 154 PL

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

MIAMI, FL. 33196
City, State, and Zip

**CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300**

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TALLAHASSEE FLORIDA

NO7 0000 870653

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.

SAMUEL E. GAMEZ
9456 SW 154 PL
MIAMI, FL. 33196

MANAGER

MARGARITA A. GAMEZ
9456 SW 154 PL
MIAMI, FL. 33196

MANAGER

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(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.)

SAMUEL E. GAMEZ

Typed or printed name of signee

NO7 0000 870653