

## Florida Department of State

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April 6, 2007

FLORIDA DEPARTMENT OF STATE

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## (((H07000088961)))

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	·
ATA MANAGEMENT GROUP, LLC	
(Must end with the words "Limited Liability Company, "Limite	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8360 W. FLAGLER STREET	8380 W. FLAGLER STREET
STE: 110-A	8TE: 110-A
MIAMI, FL 33144	MIAMI, FL 33144
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regista business entity with an active Florida registration.)  The name and the Florida street address of the re-	ered Agent. You must designate an individual or another Section 6
MARK CARTO	οττο ΑΑΑ
Name	DA 23
8360 W. FLAGLER ST	REET STE: 110-A
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)
MIAMI .	FL 333144
	nd 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.

Register Agest's Signature (REQUIRED)

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Page 1 of 2

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## (((H07000088961)))

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	MOISES MOLDES
	8360 W. FLAGLER STREET STE: 110-A
	MIAMI, FL 33144
MGRM	JOSEPH YEAMPIERRE
	8360 W. FLAGLER STREET STE: 110-A
•	MIAMI, FL 39144
<del> </del>	
• •	
	<u> </u>
~···	
(Use attachment if necessary)	
LE V: Effective date, if other than	the date of filling: (OPTIONAL)
iective date is deted, the date mus	t be specific and cannot be more than five business days brick
days after the date of filing.)	PIO I
	<b>&gt;</b>
REQUIRED SIGNATURE:	
CEOCHED SECRETORE.	· ·

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

MOISES MOLDES
Typed or printed name of signee

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