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DIVISION OF CORPORATIONS
OF THE PROPERTY OF CORPORATIONS
OF THE PROPERTY OF TH

COVER LETTER

Division of Co				
SUBJECT: KIKAZ	OOM LAX06, LLC			
		ed Liability Company)		•
The enclosed Articles of	f Organization and fee(s) are s	submitted for filing.		
Please return all corresp	ondence concerning this matt	er to the following:		
	GUILLERM	O J. ARGUELLO		
		Name of Person)		
	MMM WIREL	ESS CORPORATION	NC	
		(Firm/Company)		
1	69 EAST FLAGI	LER STREET, SU	ITE 637	
		(Address)		0 P.
	MIAM	I, FL 33131		IS TO
		/State and Zip Code)		7
For further information of	concerning this matter, please	call:		OT JUN -6 PM 1: 03
GUILLERMO	J. ARGUELLO	at (305) 379-460)7	. 03
(Name	of Person)	(Area Code & Daytime Te	lephone Number)	-
Enclosed is a check fo	r 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 Certificate of State Certified Copy (additional copy is end	us &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center	ns Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam	e:		
The name of the Lin	nited Liability Company	is:	
KIKAZOOM LAXO			
(Must end with the words '	'Limited Liability Company, "Li	mited Company" or their abbreviation "LLC," of	or "L.C.,")
ARTICLE II - Add	roce		
		principal office of the Limited Liab	oility Company is:
•			
Principal Office Ad	<u>ldress:</u>	Mailing Address:	
169 EAST FLAGLER	ST.	169 EAST FLAGLER ST.	
SUITE 637		SUITE 637	
MIAMI, FL 33131		MIAMI, FL 33131	
business entity with an ac The name and the Fl	lorida street address of th	ne registered agent are:	SION OF CORPOR
-	Na	me	유 유유 유
-	199 EAST FLAGLER ST. #2102		1: 03
	Florida street	address (P.O. Box NOT acceptable)	ယ 🕏
	MIAMI	FL 33131	
_	City, Sta	te, and Zip	
liability compan registered agent and statutes relating to	y at the place designated d agree to act in this capa o the proper and complete	to accept service of process for the aim this certificate, I hereby accept the acity. I further agree to comply with the performance of my duties, and I ambegistered agent as provided for in Chi	appointment as he provisions of all familiar with and

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV – Manager(s) or Managing Member(s):

The management of the limited liability company is reserved for the Members.

The name and address of the member of the Limited Liability Company is:

Managing Member – MMM Wireless Corporation 169 East Flagler Street, Ste. 637 Miami, Florida 33131

ARTICLE V – Duration:

The duration of the Limited Liability Company shall be: 12/31/2046.

SIGNATURE:

Signature of a member or an authorized representative of a member

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

GUILLERMO J. ARGUELLO

Name of Signee

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