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(R	equestor's Name)		
(A	ddress)		
A)	ddress)		
(C	ity/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(B	usiness Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
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	\$		

Office Use Only

EFFECTIVE DATE 8-14-07



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SECRETARY OF STATE

COVER LETTER

TO: Registration Solution of Co				
SUBJECT:	NORMAND	Y I, Lo d'Liability Company)	<i>′</i>	
	(Name of Limite	d/Liability Company)		
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.		
•	ondence concerning this matte	_		
	BETHMAN	Name of Person) ENSER PRISC. (Firm/Company)		······································
	(Name of Person)	•	
	BNABENTY	ENTERPRISE	1 Conp	2.
_		(Firm/Company)		
	12765 S.W	1. 20 TH S	TREET	
.		(Address)	AL	07
	MIRAMA	(Address) (Address) C, FC 3: (State and Zip Code)	3029 E	07 AUG 21
-	(City	/State and Zip Code)	YSS!	2
	concerning this matter, please		EE, FLC	AMIL: 53
ACEJANDA	lo TORRES e of Person)	at (<u>305</u>) <u>305</u> (Area Code & Daytime T	2 - 5 976 D	: 53 AIE
((,	
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 Fili Certificate of S Certified Copy (additional copy is	tatus &
	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 Tallahassee, FL 32301	ns	

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,"	I. LLC	
(Must end with the words "Limited Liability Company, "Limited Company," Limited Company," Limited Company, "Limited Company, "Limited Company," Limited Company, "Limited Company," Limited Company, "Limited Company," Limited Company, "Limited Company, "Limited Company," Limited Company, "Limited Company, "Limited Company," Limited Company, "Limited Company," Limited Company, "Limited Company, "Limited Company, "Limited Comp	Company" or their abbreviation "LI	.C," or "L.C.,")
ARTICLE II - Address:		
The mailing address and street address of the principle.	cipal office of the Limited	Liability Company is:
D 1 1 1000 411	8.5 D	
	Mailing Address:	
1411 NONMANDY DRIVE MISMI BEDCH, FR 33141	1411 NORMAN	IDY DRIVE
MIAMI BEDCH, FR 33141	MIAHI BEACH, FO	1/33141
		
ARTICLE III - Registered Agent, Registered C		
(The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)	ed Agent. You must designate an inc	lividua or another
•		CR 7
The name and the Florida street address of the reg		HAS US 2
ALEJANDR	IANAY DRIVE ss (P.O. Box NOT acceptable)	SET I
Name	_	
1411 NORM	INDY DRIVE	AH II: 53 UF STATE E. FLORIO
Florida street addres	ss (P.O. Box <u>NOT</u> acceptable)	5.3 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5
MIAMI BEACH	4L FC 33141	Τ,
City, State, and	l Zip	
Having been named as registered agent and to acc	cept service of process for th	he above stated limited
liability company at the place designated in this	s certificate, I hereby accept	the appointment as
registered agent and agree to act in this capacity.		
statutes relating to the proper and complete perfo accept the obligations of my position as registe		
accept the obligations of my position as registe	rea ageni as providea jor in	Chapter 000, F.B
Older		
Registered Agent's Signature	(DECHIDED)	
Registered Agent's Signature	(KEQUIKED)	

TECECTIVE DATE 8-14-07

(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:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	ALEJANDRO PORRES
	ALEJANDRO PORRES 1411 NORMANDY DRIVE MIDMI BEACH, FL 33141
	MIDMI BEACH, FL 33141
 	
<u> </u>	
	·
	
(Use attachment if necessary)	
ADTICLE V. Effective data if other the	an the date of filing: August 14, 2007. (OPTIONAL)
ARTICLE V: Effective date, if other the date m	ust be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	ust be specific and cannot be more than five business days prior
3 ,	
<u>REQUIRED</u> SIGNATURE:	I
	ACE O7
Of the state of	an San A
Signature of a n	dember or an authorized representative of a member
(In accomismos v	with section 608 408(2). Florido Statutos the avenution
of this document	vith section 608.408(3), Florida Statutes, the execution to constitutes an affirmation under the penalties of perjury.
that the facts s	tated herein are true.)
	t constitutes an affirmation under the penaltics of perjury, tated herein are true.) ALE TAMORO TORREST STATEMENT TORREST STATEMENT TORREST STATEMENT STATE
	Typed or printed name of signee

Name and Address: