Aug 38 2007 3:55 Division of Corporations of 2 Florida Department of State **Division of Corporations** Public Access System Electronic Filing Cover Sheet Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H07000216259 3))) H070002162593ABC% Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)205-0383 AUG From: Account Name : EXPRESS CORPORATE FILING SERVICE INC ထ Account Number : I2000000146 ~ AI. : (305)444-4994 Phone \triangleright Fax Number : (305)444-4977 ;; õ H co 28 3U^A **IDA/FOREIGN LIMITED LIABILITY CO.** 20 **INERTIA CAPITAL, LLC** Certificate of Status 0

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

and and INERTIA CAPITAL, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

STETTEN STEP and the second second ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: .

Prin	cinal Office Address:	Mailing Address:		
<u>4</u>	779 COLLINS AVE.	4779 COLLINS AVE.		a karang ang ang ang ang ang ang ang ang ang
#	2107	* <u>#`2107```</u>		
M	TAMI BRACH, FL 33140	MTAMI BEACH, FL 3314	<u>o - 2</u>	La transfer a succession of the
(The 1	FICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own Registered Liability Company cannot serve as its own Registered and the serve	ed Office, & Registered Agent's Statered Agent's Statered Agent You must designate an individua		
The	name and the Florida street address of the	registered agent are:		
	ERNESTO A	ARGUELLO		, –
	Nam	le ?;		- · · ·
	4779 COL	LINS AVE., #2107		
		ddress (P.O. Box NOT acceptable)		
	<u> </u>	FL 33140		

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 ohligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

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Name and Address:

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Titte:</u> "MGR" - Manager "MGRM" - Managing Member

ERNESTO ARGUELLO MGRM 4779 COLLINS AVE. 21 0.7 MIAMI BEACH CAMILO BARCENAS MGRM ŝ 4124 COLLINS AVE N MTAMI BBACH. FL 33140 5 1.4.5.5.55 1.1.2 14 1.... 1 N (P. M. 5 ٢n Om ÷.... 8 D 6 N 1 23 1014 ÷.,

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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REOUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with sceptor 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.)

ERNESTO ARGUELLO Typed of printed marne of signee

Filing Funs:

S125.00 Filling Pee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

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