Division of Corporations Public Access System

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To:

Division of Corporations

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Account Name : HUBCO

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Phone : (516)935-3940

Fax Number : (516)935-3088

FLORIDA/FOREIGN LIMITED LIABILITY CO.

De Caires and Murphy, LLC

Certificate of Status	I
Certified Copy	0
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Estimated Charge	\$130.00

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H07000232596

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Limited Liability Con	npany is: De Caires and Murphy, LLC
ARTICLE II - Address The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
26:0 SW 28th Lane	
Mi upi, FL 33133	
ARTICLE III - Registered Aprilication and Florida street address	gent, Registered Office & Registered Agent's Signature
•	Maria Jose De Caires Murphy
	Nama

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 futies, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, ES.

(P.O. Box or Mail Drop Box NOT Acceptable)

(City / State / Zip)

2640 SW 28th Lane

Miami, FL 33133

Registered/Agent's Signature - Maria Jose De Caires Murphy

ARTICLE IV - Manager(s) or Managing Member(s): The hame and address of each Manager or Managing Member is as follows: Title: Name and Address: "NIGR" = Manager "NIGRM" = Managing Member MGR Maria Jose De Caires Murphy - 2640 SW 28th Lane, Miami, FL 33133 (Use attachment if necessary) REQUIRED SIGNATURE: (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.) Maria Jose De Caires Murphy Typed or printed name of signee