

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : ARES & COMPANY, C.P.A., P.A.
Account Number : 120000000268
Phone : (305) 229-8256
Fax Number : (305) 229-8252

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

I M S USA, L.L.C.

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is:

I M S USA, L.L.C.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

12392 NW 14TH CT.
PEMBROKE PINES, FL. 33026

ARTICLE III - REGISTERED AGENT

The name and the Florida street address of the Registered Agent are:

MARIA A. ALVARADO
12392 NW 14TH CT.
PEMBROKE PINES, FL. 33026

ARTICLE IV - DURATION

The period of duration for the Limited Liability Company shall be: Indefinite

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ARTICLE V - MANAGEMENT

The Limited Liability Company is to be initially managed by the Managing Members whose names are:

MARIA A. ALVARADO

-


MANAGING MEMBER

ARTICLE VI - ADMISSION OF ADDITIONAL MEMBERS

The right, if given, to the General Manager to admit additional Managing Members and the terms and conditions of the admission shall be considered by means of an application and a cash contribution all of which shall be agreed by the members at their discretion.

ARTICLE VII - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, to the remaining Managing Members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of the General Manager or other Managing Members and on the occurrence of any other event which terminates the continued membership of the member and then the limited liability company shall be conferred to the remaining members, who in turn shall designate by agreement the new General Manager from them.


Signature of Managing Member
MARIA A. ALVARADO

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS
THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND
REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the limited liability company is:

I M S USA, L.L.C.

1. The name and the Florida street address of the registered agent is:

MARIA A. ALVARADO
12392 NW 14TH CT.
PEMBROKE PINES, FL. 33026

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 and accept the obligations of my position
as registered agent



MARIA A. ALVARADO

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