

02/01/2008 12:35

BERRIZ & GIRALDO P.A.

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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 : BERRIZ & GIRALDO P.A.
Account Number : I19990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098

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TALLAHASSEE FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

G.A.M. GENERAL SERVICES, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

J. BRYAN

FEB - 5 2008

2/1/2008
EXAMINER

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

G.A.M. GENERAL SERVICES, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

G.A.M. GENERAL SERVICES, LLC.

ARTICLE II - ADDRESS

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

**9850 E BAY HARBOR DR # 2
BAY HARBOR, FL. 33154**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

The name and the Florida street address of the registered agent are:

GABRIEL ALEJANDRO MEDINA

9850 E BAY HARBOR DR # 2

Florida street address (P.O.BOX NOT acceptable)

BAY HARBOR, FL. 33154

City, State, and Zip

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DIVISION OF CORPORATIONS

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**CLARA GIRALDO P.A.
4080 SW 84 AVE SUITE C
MIAMI, FL 33155
(305) 485-9300**

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


REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

GABRIEL ALEJANDRO MEDINA
9850 E BAY HARBOR DR # 2
BAY HARBOR, FL. 33154

MANAGER

ADRIAN EDGARDO POLIAKOF
9850 E BAY HARBOR DR # 2
BAY HARBOR, FL. 33154

MANAGER

(An additional article must be added if an effective date is requested)



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

(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.)

GABRIEL ALEJANDRO MEDINA
Typed or printed name of signee

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