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To;

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634~3694 Fax Number: (305)633-9696

### FLORIDA/FOREIGN LIMITED LIABILITY CO.

integral solutions investors, l.l.c.

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Page Count		04
Estimated Charge		\$155.00

J. BRYAN

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF INTEGRAL SOLUTIONS INVESTORS, L.L.C.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

#### **ARTICLE I**

The name of the Limited Liability Company is: Integral Solutions Investors, L.L.C.

#### ARTICLE II

The mailing address and street address of the principal office of the Limited Liability Company is: 2701 Ponce de Leon Boulevard, Suite 202, Coral Gables, FL 33134.

#### **ARTICLE III**

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

Marga lurman 2701 Ponce de Leon Boulevard, Suite 202 Coral Gables, FL 33134

#### ARTICLE IV

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

#### ARTICLEY

The name and address of each Manager or Managing Member is as follows:

Title

Name and Address

Managing Member &

Marga lurman

Manager

2701 Ponce de Leon Boulevard, Suite 202

Coral Gables, FL 33134

Managing Member &

Manager

Mauro luman

c/o 2701 Ponce de Leon Boulevard, Suite 202

Coral Gables, FL 33134

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Managing Member & Manager

Henry lurman c/o 2701 Ponce de Leon Boulevard, Suite 202 Coral Gables, FL 33134

Manager

Mayro Jurgan, Manager

Henry lurman, Manager

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# CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA, NAMING AN AGENT UPON WHOM PROCESS MAY BE SERVED

That <u>INTEGRAL SOLUTIONS INVESTORS, L.L.C.</u> desiring to qualify under the laws of the State of Florida, with its principal office at: 2701 Ponce de Leon Boulevard, Sulte 202, Coral Gables, FL 33134, has named Marga lurman, as its agent to accept service of process within the State of Florida.

Having been named registered agent and to accept service of process for the above named limited liability company, at the place designated in the Articles of Organization and this Certificate, I hereby accept the appointment and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent provided in Chapter 608 F.S.

Dated this

Marga Yuman

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