

**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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO**

**NOAH'S INTERNATIONAL SERVICES, LLC**

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

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TALLAHASSEE, FLORIDA

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**D. BRUCE**

FEB 18 2008

**EXAMINER**

*HOP000041693.*

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

**NOAH'S INTERNATIONAL SERVICES, LLC.**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**NOAH'S INTERNATIONAL SERVICES, LLC.**

**ARTICLE II - ADDRESS**

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

**8215 SW 152<sup>ND</sup> AVE APT # G-110  
MIAMI, FL. 33193**

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

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

**JUAN CARLOS MARTINEZ**

**8215 SW 152<sup>ND</sup> AVE APT # G-110**

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

**MIAMI, FL. 33193**

City, State, and Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*Atara Giraldo P.A.  
4080 SW 84 Ave.  
Miami, Fl. 33155.  
(305) 485-9300.*

*HOP000041693.*

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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.

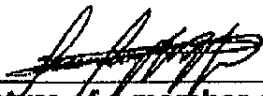
**JUAN CARLOS MARTINEZ**  
8215 SW 152<sup>ND</sup> AVE APT # G-110  
MIAMI, FL. 33193

MANAGER

**GUIDO PELAEZ GOITIA**  
8215 SW 152<sup>ND</sup> AVE APT # G-110  
MIAMI, FL. 33193

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.)

**JUAN CARLOS MARTINEZ**  
Typed or printed name of signee

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