Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000058943 3)))



H080000588433ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335 : (305)599-0839 Phone

Fax Number : (305)736-0346

1. 180



ORIDA/FOREIGN LIMITED LIABILITY CO.

Effective Date 3

DRAGON 7 FLY, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 02 |
| Estimated Charge | \$155.00 |

Electronic Filing Menu

Corporate Filing Menu

B. Tadlock MAR 07 2008

ARTICLE I - Name: The name of the Limited Liability Company is: Dragon 7 Fly, LLC (Muss end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is; Principal Office Address: 1304 S.W. 150 Terrace Miami, FL 33194 Miami, FL 33194

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

Carlos E. Garcia CPA, P.A.

Nam

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Lightitty Company comet serve as its own Registered Agent, You must designate an individual or another

10691 N. Kendall Drive, Suite 301

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

Miami, FL 33176

business entity with an active Florida registration.)

City, State, and Zip

Having been named as registered agent and to accept service of process for the ubove 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 (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| Title: | Name and Address: | • |
|---|-----------------------|---|
| "MGR" = Manager "MGRM" = Managing Member | | |
| MGRM | Maria C. Torres | |
| | 1304 S.W. 150 Terrade | |
| | Miemi, FL 33194 | |
| MGRM | Rosa V. Ordofiez | |
| | 1304 S.W. 150 Torrace | |
| | Miami, FL 35194 | |
| | ٠. | |
| | | ~ |
| | | |
| | | |
| | | |
| | | |
| , | | |

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filling: March 5, 2008 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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

(In accordance with section 608.408(3), Plorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Carlos E. Garcia CPA

Typed or printed name of signee

Filing Peess

5125.06 Filing Fee for Articles of Organization and Designation of Registered Agent
5 30.00 Certified Copy (Ontional)
5 5.00 Certificate of Status (Optional)

Page 2 of 2