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(Address)

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(Business Entity Name)

(Document Number)

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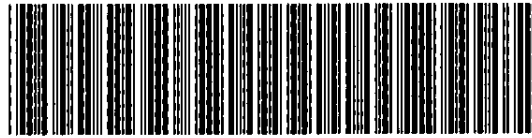
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**EXAMINER**



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# LAZARUS

## CORPORATE FILING SERVICE

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### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. GRUPO PROFESIONAL SERTERE,  
(Corporation Name) (Document #)
2. LLC  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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#### NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

#### AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

#### OTHER FILINGS

- Annual Report
- Fictitious Name

#### REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

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

**ARTICLE I – Name:** The name of the Limited Liability Company is:

**GRUPO PROFESIONAL SERTERE, LLC**

**ARTICLE II – Address:**

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

**Principal Office Address:**

15411 SW 26 Terrace  
Miami, FL, 33185.

**Mailing Address:**

15411 SW 26 Terrace  
Miami, FL, 33185

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's  
Signature:**

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

**ANDRES BERZINS**  
15411 SW 26 Terrace  
Miami, FL, 33185.

*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.*

**ANDRES BERZINS**

  
**Registered Agent's Signature**

(CONTINUED)

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**ARTICLE IV – Manager(s) or Managing Member(s):**

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

<b><u>Title:</u></b>	<b><u>Name and Address:</u></b>
MGR	BERZINS ANDREINA
MGR	CORONA NEUMIDIA
MGR	BERZINS ANDRES

**REQUIRED SIGNATURE:**



**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.)

BERZINS ANDRES

**Typed or printed name of signee**