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Division of Corporations

BERRIZ & GIRALDO P.A.

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : BERRIZ & GIRALDO P.A.
Account Number : T19990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

PREFERRED DIGITAL PARTNERS, LLC.

Certificate of Status	1
Certified Copy	0
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY
OF**

PREFERRED DIGITAL PARTNERS,LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

PREFERRED DIGITAL PARTNERS,LLC.

ARTICLE II - ADDRESS

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

**6355 NW 36 STREET STE-504
VIRGINIA ,FL 33166**

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

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

JOHN MORENO

6355 NW 36 STREET STE-504

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

VIRGINIA,FL 33166

City, State, and Zip

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**CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (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.

JOHN MORENO
6355 NW 36 STREET STE-504
VIRGINIA, FL 33166

MANAGER


JAVIER ROCHA
6355 NW 36 STREET STE-504
VIRGINIA, FL 33166

MANAGER

PEDRO SOTOMAYOR
6355 NW 36 STREET STE-504
VIRGINIA, FL 33166

MANAGER

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


Signature of a member of 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.)

JOHN MORENO

Typed or printed name of signee

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