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Florida Department of State
Division of Corporations
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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.

anamaurol & associates, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

S. HAWKES

DEC 10 2008

EXAMINER

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ANAMAUROL & ASSOCIATES, LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

6705 Red Road, Suite 405
Coral Gables, Florida 33143

Mailing Address:

6705 Red Road, Suite 405
Coral Gables, Florida 33143

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's

Signature:

(The Limited Liability Company must or must not have its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ANA ADRIAZOLA RODRIGUEZ

Name

6705 Red Road, Suite 405

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

Coral Gables, FL 33143

City, State, and Zip

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.

Ana Adriazola Rodriguez

Registered Agent's Signature (REQUIRED)

ANA ADRIAZOLA RODRIGUEZ

(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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

MGRM

Name and Address:

JOSE ODON RODRIGUEZ

6705 Red Road, Suite 405
Coral Gables, Florida 33143

ANA ADRIAZOLA RODRIGUEZ

6705 Red Road, Suite 405
Coral Gables, Florida 33143

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: December 9, 2008

(OPTIONAL)

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Conversion, if an effective date is listed therein.)

REQUIRED SIGNATURE:

JOSE O. RODRIGUEZ

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.)

JOSE ODON RODRIGUEZ

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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