

Florida Department of State

Division of Corporations

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Division of Corporations

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Account Name : LAZARUS CORPORATE FILLING SERVICE, INC.

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Phone: (305)552-5973
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

L'AGENZIA LLC.

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EXAMINER

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MITICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE 1 - Name: The name of the Limited Liability Company is:
(Must 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: Apt Mailing Address; 11749 S.W. 88 St.G-203 Same" Manni, FLA 33176
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as 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: Carlos Calatoxud Name 11249 Sw 88+h st Apt G-203 Florida street address (P.O. Box NOT acceptable) Miami, FL FL 33176 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.

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Registered Agent's Signature (REQUIRED)

(CONTINUED)
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FAX NO. :3052201440

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Title: "MGR" = Mana; "MGRM" = Mar	ger naging Member	Name and Address:	,
MGRM	<i></i>	Carlos Calatay 11249 Sw 88 SF A	1Vd 1p+G-203
MGR		Maria H. Oram 11249 SW 88th St	<u>.</u> <u>0</u> 5 pp +6-20:
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