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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Sunrise Investor Group LLC

Certificate of Status	0
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FAX AUDIT # 4090001809493

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P.02
SECRETARY OF STATE
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**ARTICLES OF ORGANIZATION
OF
Sunrise Investor Group LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Sunrise Investor Group LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
9999 Summerbreeze Dr Apt # 215, Sunrise, Florida 33322.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Justin Kachappilly, 9999 Summerbreeze Dr Apt # 215, Sunrise, Florida 33322. Located in the County of Broward.


ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

Justin Kachappilly, 9999 Summerbreeze Dr Apt # 215, Sunrise, Florida 33322



Business Filings Incorporated, Organizer
Mark Williams, A.V.P.
Authorized Representative
Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,
WI 53717
(608) 827-5300

Date: August 4, 2009

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CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICESECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Sunrise Investor Group LLC**

The name and address of the registered agent and office is Justin Kachappilly, 9999 Summerbreeze Dr Apt # 215, Sunrise, Florida 33322. Located in the County of Broward.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: _____


Justin KachappillyDate: 08/10/2009

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