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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA Account Name

Account Number : 076624003440 : (305)444-6226 Phone

Fax Number : (305)442-4829

FLORIDA/FOREIGN LIMITED LIABILITY CO.

OKT SOLUTION LLC

Certificate of Status	1
Certified Copy	0
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SEP 18 2009

EXAMINER

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<u>ARTICLES OF ORGANIZATION</u>

QΕ

OKT SOLUTION LLC.

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida:

ARTICLE I NAME

The name of this Limited Liability Company is: OKT SOLUTION LLC.

ARTICLE II GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV ADDRESS

The principal office and mailing address of this Limited Liability Company in the State of Florida is 9260 NW 102 STREET, MIAMI, FLORIDA 33178. The Board of Managers may from time to time move the principal office to another address in Florida.

ARTICLE V REGISTERED OFFICE, REGISTERED AGENT

That OKT SOLUTION LLC., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates ARAZOZA & FERNANDEZ-FRAGA P.A., as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134

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ARTICLE VI MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The Initial Manager of the Company shall be:

LUIS ANDRADE of 9260 NW 102 STREET, MIAMI, FLORIDA 33178

WITNESS the hand and seal of a Member of the Company in Miami-Dade County, State of Florida, this ______ day of September, 2009.

SECRETARY OF STATE NTE-BELLUCA

STATE OF FLORIDA

) SS:

COUNTY OF MIAMI-DADE

)

PERSONALLY appeared before me, VICENTE DE LUCA, a Member of the Company, who is personally known to me or presented his _______
as identification, who being by me first duly sworn, acknowledges that he signed the same for the purposes therein expressed.

WITNESS my hand and seal at Miami-Dade County, Florida this 174 day of September, 2009

NOTARY PUBLIC-STATE OF FLORIDA

Laura Kohn

Commission # DD770888

Expires: MAY 16, 2012

BONDED THEO ATLANTIC BONDING CO., INC.

NOTARY PUBLIC, SYAVE OF FLORIDA AT LARGE

My commission expires:

09/16/2009 23:11

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That OKT SOLUTION LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, designates ARAZOZA & FERNANDEZ FRAGA P.A., as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

REGISTERED AGENT

ADELAIDA FERNA

Director

Arazoza & Fernandez-Fraga P.A.

Date: September _____, 2009