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To:

Division of Corporations

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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FLORIDA/FOREIGN LIMITED LIABILITY CO. LELOIR L.L.C.

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

J. BRYAN

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMP. ARTICLE I - Name: The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "LLC," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Mailing Address: Principal Office Address: 39015.0CEAN DENRESPIZA 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.) CLAUDIA BENTUA

Name

390/ South Ocean Deurc #127

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

HOLY WOOD FL 330/9

City, State, and Zip The name and the Florida street address of the registered agent are:

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

3052201440 02/11/2010 11:51

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRH	SANCHEZ A PEJANDIND 3901 SOUTH OCEAN DEWZ # 12 P UDUSUDOD FC 33019
MERT.	INGIANNA Silvani Monica 3901 SOUTH OCEAN DOWN
	3901 SOUTH OCEAN DOWN
(Use attachment if necessary)	
LE V: Effective date, if other to ffective date is listed, the date to days after the date of filing.)	an the date of filing: (OPTIONAL ust be specific and cannot be more than five business days
REQUIRED SIGNATURE:	
Signature of a s	member or an authorized representative of a member. with section 608,408(3), Florida Statutes, the execution
Signature of a signature of this doctymen	member or an authorized representative of a member. with section 608,408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)

Filipa Feeri

Fee for Articles of Organization and Designation of Registered Agent
Used Copy (Optional)
rtificate of Status (Optional)