

**Florida Department of State**  
**Division of Corporations**  
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To:

Division of Corporations  
 Fax Number : (850) 617-6383

From:

Account Name : CSH SERVICES, LLC  
 Account Number : T200700003160  
 Phone : (800) 494-3124  
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**TRU Radiance, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
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 DIVISION OF CORPORATION

7-10000035932-3

**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

TRU RADIANCE, LLC

**ARTICLE II ADDRESS**

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

20316 NATURES CORNER DRIVE  
TAMPA, FLORIDA 33647**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

ISABEL DIAZ  
20316 NATURES CORNER DRIVE  
TAMPA, FLORIDA 33647

Having been named as registered agent 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.

x Isabel Diaz

ISABEL DIAZ / Registered Agent's signature

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PAGE 2 TRU RADIANCE, LLC

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a Manager Managed Company.

**ARTICLE V MEMBERS (optional)**

MEMBER

MIRIAN CAICEDO

87 FERRY STREET

JERSEY CITY, NEW JERSEY 07307

MEMBER

EDUARDO CAICEDO

87 FERRY STREET

JERSEY CITY, NEW JERSEY 07307

**ARTICLE V MANAGERS (optional)**

MANAGER

ISABEL DIAZ

20316 NATURES CORNER DRIVE

TAMPA, FLORIDA 33647

x Isabel Diaz

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.

ISABEL DIAZ

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