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| (Requestor's Name) | | | |
|---|---|--|--|
| _ Rodijo B. Gronza koz | | | |
| 8275 SU 86 Terr | | | |
| _ Mismi, FL 33143 | | | |
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| | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAI | L | | |
| (Business Entity Name) | | | |
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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
| L. SELLERS | | | |
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SECRETARY OF STATE

May 19, 2010

Florida Department of State

Re: Articles of Organization

Dear Sirs;

Enclosed please find the Articles of Organization as well as the filing fee for Five Two Nine, LLC. If you should have any questions please contact me at (305) 494-8084 or by email at rbgmia@gmail.com.

·1.

Regards,

Rodrigo Gonzalez

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | | |
|--|--|--|--|
| The name of the Limited Liability Company is: | | | |
| | | | |
| Five Two Nine, LLC. | · - · · · · · · · · · · · · · · · · · · | | |
| (Must end with the words "Limited Liability | y 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: | Mailing Address: | | |
| 8275 SW 86 Terrace | 8275 SW 86 Terrace | | |
| liami, Florida 33143 Miami, Florida 33143 | | | |
| | | | |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration. | red Agent. You must designate an individ | | |
| The name and the Florida street address of the re- | gistered agent are: | | |
| Walter Gonzalez, Jr., Esq. | | | |
| Name | | | |
| 8275 SW 86 Terrace | | | |
| Florida street address (P.O. Box NOT acceptable) | | | |
| Miami, FL 33143 | | | |
| City, State, and Zip | | | |
| Having been named as registered agent and to ac liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete perf accept the obligations of my position as regist | is cert ficate, I hereby accept the I further agree to comply with formance cf my duties, and I am | e appointment as the provisions of all familiar with and | |
| | (DCOLUBED) | 10 10 | |
| Registered Agent's Signatur | е (КЕQUIКЕD) | E8 5 71 | |
| (CONTIN | (UED) | 2000年 | |
| Page 1 c | of 2 | | |

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Rodrigo B. Gonzalez 8275 SW 86 Terrace Miami, Florida 33143 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.) Typed or printed name of signee Filing Fees:

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)