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EXAMINER





ACCOUNT NO. : I2000000195 REFERENCE: 450681 7634212 AUTHORIZATION : COST LIMIT : ORDER DATE : July 19, 2010 ORDER TIME : 11:41 AM ORDER NO. : 450681-005 CUSTOMER NO: 7634212 DOMESTIC FILING NAME: LAFORE COMMERCIAL LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Troy Todd - EXT. 2940

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LAFORE COMMERCIAL LLC

(Must end with the words "Limited Liability 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:

Mailing Address:
520 Brickell Key Dr.
Suite O-301
Miami, FL 33131

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.)

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

<u>Dymax Ii</u>	nternational Services Inc.
	Name
520 Bricl	cell Key Drive, Suite O-301
	Florida street address (P.O. Box NOT acceptable)
Miami	_{FL} 33131
	City, State, and Zip

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.

Dymax International Services Inc.

/s/Ricardo del Giglio By:Ricardo del Giglio, as its President
Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = N "MGRM" =	Manager - Managing Member	Name and Address:
MGR		LAFORE COMMERCIAL INC. 520 Brickell Key Dr., Suite O-301 Miami, FL 33131
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	ment if necessary)	
LE V: Effe fective date days after t	ctive date, if other than	the date of filing: (OPTION t be specific and cannot be more than five business da
LE V: Effe fective date days after t	ctive date, if other than is listed, the date musthe date of filing.) D SIGNATURE: /s/Thays de Salas	the date of filing: (OPTION to be specific and cannot be more than five business date and cannot be more than five business date.
LE V: Effe fective date days after t	ctive date, if other than is listed, the date must the date of filing.) D SIGNATURE: /s/Thays de Salas Signature of a ment of this document conthat the facts state By: Lafore Comme	t be specific and cannot be more than five business da