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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. MATAKA, LLC

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

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2010 AUG 19 AM 9: 28

SECRETARY OF STATE ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mataka LLC
(Must and with the words "Limited Liability Company, "L.L.C.," or "L.L.C.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

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 ageut are:

Maring 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..

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A YOUTH CIVIN YOU THE	2010 AUG 19 Am 3.
ARTICLE IV- Manager(s)	or Manager or Managing Manaber is an follows:
, the name and address or each	h Manager or Managing Member is as follows: SECRETARY OF STA
Title:	Name and Address:
"MGR" - Manager	7.1201.0 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
"MGRM" = Managing Memb	oer .
MGR	MARLEN PERNETTI
	1710 GRANADA GLVD
	CORAL GABLES PL 33/34
11/-201	Total EchT-Olivia
M10791	801 BRICKEIL KEY BLVD #260
	MIGMI FI 33/31
•	TOTIONAL PC 35131
	• · · ·
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;	
(Use attachment if necessary	<i>y</i>)
CLEV: Effective date, if other	
	te must be specific and cannot be more than five business days prior
90 days after the date of filing	A) *
REQUIRED SIGNATURE	Yo. ▲
VERNOR STATE OF	<u>Iu</u>
	laven funtti
Signature	of a member or an authorized representative of a member,
Cin secorda	ance with section 608.408(3), Florida Statutes, the execution
OF CIME COC	umod constitutes to affirmation under the constitut of neciury
that the S	facts stated herein are true.)
	Marien Pernet to
	Typed or printed name of signer

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