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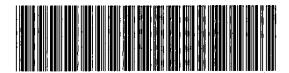
| (Re                     | equestor's Name)   |             |
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| PICK-UP                 | ☐ WAIT             | MAIL        |
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| (Bu                     | isiness Entity Nar | ne)         |
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| Certified Copies        | _ Certificates     | s of Status |
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| Special Instructions to | Filing Officer:    |             |
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G. MCLEOD

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**EXAMINER** 



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SECRETARY OF STATE

# COVER LETTER

|  | on Section<br>of Corporations                            |   |
|--|--|---|
| SUBJECT:                               | LOEF CONSULTING  | G, L.L.C.   |
|  | Name of Limited Liability Co                             | ompany  |
| Dear Sir or Madan                      | ••   |   |
| Dear 311 of Madail                     |  |   |
| The enclosed Artic                     | eles of Correction and fee(s) are submitted for filing   |   |
| Please return all co                   | prrespondence concerning this matter to the following    | ng:   |
|  | JOSE C, MARRERO  |   |
|  | Name of Person   | _   |
|  |  |   |
| LAW OFF                                | ICES OF JOSE C. MARRERO, P.A.                            | _   |
|  | Firm/Company   |   |
| 1200 BF                                | RICKELL AVENUE SUITE NO 505                              |   |
|  | Address  | _   |
|  |  |   |
|  | MIAMI, FL 33131  | _   |
|  | City/State and Zip Code                                  |   |
| JC                                     | SE@MARREROLAW.COM  |   |
| E-mail addre                           | ss: (to be used for future annual report notification)   | _   |
|  |  |   |
| For further informa                    | ation concerning this matter, please call:               |   |
|  |  | 470.0000  |
|  | SE C. MARRERO at ( 305<br>Name of Person Area Co         |   |
| _                                      |  |   |
| STREET/COURI                           | ER ADDRESS:  | MAILING ADDRESS:  |
| Registration Section                   |  | Registration Section                                    |
| Division of Corpor<br>Clifton Building | ations   | Division of Corporations P.O. Box 6327                  |
| 2661 Executive Ce                      | nter Circle  | Tallahassee, Florida 32314                              |
| Tallahassee, Florid                    | a 32301  |   |
| Enclosed is a chec                     | k for the following amount:                              |   |
| \$25 Filing Fee                        | \$30 Filing Fee & S55 Filing Fee & Certificate of Status | \$60 Filing Fee, Certificate of Status & Certified Copy |

CR2E062 (08/05)

# ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

| FIRST       | The name of the limited liability company is:  LOEF CONSULTING, L.L.C.  |                   |             |
|-------------|---|-------------------|-------------|
| <u>SECO</u> | ND: The articles of organization or the application to transact business  |                   |             |
| (CH         | ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST  | <u>ATEM</u>       | <u>ENT</u>  |
|             | Contains an incorrect statement. The incorrect statement, the reason the statement, and the corrected statement are as follows:  THE INCORRECT STATMENT IS SOTO, CARLOS | tement            | is          |
|             | THE CORRECT STATEMENT IS ROSSO, CARLOS  |                   | <del></del> |
|             | <u>OR</u>   |                   |             |
|             | Was defectively signed. The manner in which the document was defectively the appropriate correction are as follows:   | y signe           | i and       |
|             |   |                   |             |
|             |   |                   |             |
| Dated:      |   | SECRETI<br>MLLAHA | 10 NOV      |
|             | Signature of a member or authorized representative of a member  | ARY (             | 8           |
|             | JOSE C. MARRERO   | FE S              | R           |
|             | Typed or printed name of signee   | IAI'E<br>ORID     | ∓ \<br>26   |
|             | Filing Fee: \$25.00<br>Certified Copy: \$30.00 (optional)   | L                 | <b>~</b> ·  |

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## Electronic Articles of Organization For Florida Limited Liability Company

L10000117908 FILED 8:00 AM November 12, 2010 Sec. Of State gmcleod

#### Article I

The name of the Limited Liability Company is: LOEF CONSULTING, L.L.C.

#### Article II

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

1390 BRICKELL AVENUE 104 MIAMI, FL. 33131

The mailing address of the Limited Liability Company is:

1390 BRICKELL AVENUE 104 MIAMI, FL. 33131

#### Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

#### Article IV

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

SEBASTIAN GOLOD 1390 BRICKELL AVENUE 104 MIAMI, FL. 33131

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.

Registered Agent Signature: SEBASTIAN GOLOD

### Article V

The name and address of managing members/managers are:

Title: MGRM SEBASTIAN GOLOD 1390 BRICKELL AVENUE SUITE NO 104 MIAMI, FL. 33131

Title: MGRM CARLOS SOTO 1390 BRICKELL AVENUE SUITE NO 104 MIAMI, FL. 33131

Signature of member or an authorized representative of a member Signature: SEBASTIAN GOLOD

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