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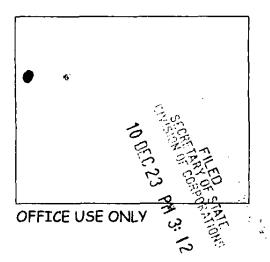
OVERSTANDA STATE OF SECURIONS

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EXAMINER



FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)656-6446



WALK-IN

ENTITY NAME:

SU FAMILY MANAGEMENT, LLC

CK# 4941 FOR \$155.00

PLEASE FILE THE ATTACHED ARTICLES & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

___ STAMPED COPY

___ CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF ORGANIZATION

 \mathbf{OF}

SU FAMILY MANAGEMENT, LLC

ARTICLE I NAME

The name of this Limited Liability Company shall be SU FAMILY MANAGEMENT, LLC (the "Company").

ARTICLE II PRINCIPAL PLACE OF BUSINESS

The principal place of business of the Company shall be 12185 S. Dixie Highway, Miami, FL 33156, and such other place or places as the member from time to time may determine. The mailing address of the Company is 12185 S. Dixie Highway, Miami, FL 33156.

ARTICLE III INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The initial registered agent of the Company shall be Atrium Registered Agents, Inc. The address of the initial registered agent is 1500 San Remo Avenue, Suite 125, Coral Gables, Florida 33146.

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager – managed company. The names and addresses of the managers who will serve as managers until the first annual meeting of members or until their successors are elected and qualified in accordance with the Operating Agreement or applicable law are:

Sixto Henry Su 12185 S. Dixie Highway Miami, FL 33156 James Antonio Su 12185 S. Dixie Highway Miami, FL 33156 David Alejandro Su 12185 S. Dixie Highway Miami, FL 33156

ARTICLE V DURATION

The period of duration of the Company shall be perpetual, and the Company shall be in existence until dissolved in a manner provided by law, or as provided in the Operating Agreement.

IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed on the 23rd day of December, 2010, effective upon filing same with the Florida Department of State.

Kaiph Nardi, Authorized Representative

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT DESIGNATING ITS REGISTERED OFFICE AND REGISTERED AGENT IN FLORIDA.

1. The name of the limited liability company is:

SU FAMILY MANAGEMENT, LLC

2. The name and address of the registered agent and office is:

Atrium Registered Agents, Inc. 1500 San Remo Avenue, Suite 125 Coral Gables, Florida 33146

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, REGISTERED AGENT HEREBY ACCEPTS THE APPOINTMENT AS REGISTERED AGENT AND AGREES TO ACT IN THIS CAPACITY. REGISTERED AGENT FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND IS FAMILIAR WITH AND ACCEPTS THE DUTIES AND OBLIGATIONS OF ITS POSITION AS REGISTERED AGENT.

ATRIUM REGISTERED AGENTS, INC.

By:

Kalph Nardi, Vice President

Date: December 23, 2010