

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: BLANCO ACCOUNTING I, INC.

Account Number : I20100000060

: (305)828-1148

Fax Number

: (305)828-1709

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Trops is 7	Address:	

FLORIDA LIMITED LIABILITY CO. NEXT STEP EXPORT L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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01/13/11

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:	
NEXT STEP EXPORT L.L.C	·	
(Must end with the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	neincinal office of the Limited Liability Compa	io:
The maining address and succe address of the	principal office of the Limited Liability Compa	лу is:
Principal Office Address:	Mailing Address:	
6847 BROOKLINE DRIVE UNIT 6847 HIALEAH FL 33015	6847 BROOKLINE DRIVE UNIT 6847 HIALEAH FL 33015	
	The second secon	ģ
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: gistered Agent, You must designate an individual or snother	VISION OF C
The name and the Florida street address of the	e registered agent are:	3
BELINDA MARIA RO	DMERO	3 3 4
Nan	ne	85 ∰ €
6847 BROOKLINE	DRIVE UNIT 6847	3 3
. Florida street a	address (P.O. Box NOT acceptable)	75
HIALEAH FL 33015	Dr	

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.

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Memi	har
WORLD WILLIAM IN THE PROPERTY OF THE PROPERTY	
MGR_	BELINDA MARIA ROMERO
	6847 BROOKLINE DRIVE UNIT 6847
	HIALEAH FL 33015
MGRM	ADITH GRIPPA
 .	6847 BROOKLINE DRIVE UNIT 6847
	HIALEAH FL 33015
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(Use attachment if necessary)	
`	and the second of the second o
LE V: Effective date, if other	than the date of filing: 01/12/2011 (OPTIONAL)
	must be specific and cannot be more than five business days prior
I down after the date of filing I	
days after the date of filing.)	
•	
days after the date of filing.) <u>REQUIRED</u> SIGNATURE:	
•	
<u>REOUIRED</u> SIGNATURE:	
REQUIRED SIGNATURE:	Relier Story Hones
Signature of	Selvestor House

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

BELINDA MARIA ROMERO

Typed or printed name of signee