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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : FLORIDA INCORPORATORS, INC.
Account Number : 075350000473
Phone : (813) 632-7882
Fax Number : (305) 402-3141

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

Email Address: apgacivil@gmail.com

FLORIDA LIMITED LIABILITY CO.
APGAcivil LLC

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ARTICLES OF ORGANIZATION FOR

APGAcivil LLC

A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

APGAcivil LLC

ARTICLE II - Mailing and Street Address:

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

**APGAcivil LLC
10661 North Kendall Drive Suite 223
Miami, FL 33176**

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

30 years

FLORIDA INCORPORATORS, INC.
8875 Hidden River Pkwy, Ste 300 1
Tampa, FL 33637
(813) 632-7882

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ARTICLE IV - Management:

Aldo Pablo Gonzalez Managing Member
10661 North Kendall Drive Suite 223
Miami, FL 33176

The remaining members may admit additional members upon the majority vote of the remaining members consenting to the admission of the additional member.

The right of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The remaining members have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited

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liability company upon the majority vote of the remaining members.

ARTICLE VII - Registered Agent:

The initial registered agent and registered office of the limited liability company shall be:

Aldo Pablo Gonzalez
10661 North Kendall Drive Suite 223
Miami, FL 33176

DATED: May 17, 2011


Aldo Pablo Gonzalez
Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

I hereby declare I am familiar with and accept the duties and responsibilities as registered agent of the limited liability company.


Aldo Pablo Gonzalez