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**FLORIDA LIMITED LIABILITY CO.
COMMERCIAL FREIGHT INNOVATIONS, LLC**

Certificate of Status	1
Certified Copy	0
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JUN 3 2011

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Commercial Freight Innovations, LLC

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

ARTICLE II - Address:

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

Principal Office Address:9737 NW 41 Street Suite # 244Doral, FL 33178**Mailing Address:**9737 NW 41 Street Suite # 244Doral, FL 33178**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 agent are:

Miguel Casa

Name

9737 NW 41 Street Suite # 244Florida street address (P.O. Box NOT acceptable)Doral, FL 33178

City, State, and Zip

*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.*Miguel Casa
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):
 The name and address of each Manager or Managing Member is as follows:

Title:
 "MGR" = Manager
 "MGRM" = Managing Member

Name and Address:

NGR

Miguel Casa
9737 NW 41 Street Suite A 244
Doral, FL 33178

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Miguel Casa
 Signature of a member or an authorized representative of a member.

(In accordance with section 608.002(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Miguel Casa

Typed or printed name of signer

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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