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TO

Division of Corporations

Fax Number

1 (850)617-6383

From:

Account Name

: FLORIDIAN TITLE GROUP, INC.

Account Number : I20110000009 Phone

: (305)792-4911

Fax Number

: (954)337-3763

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

Email Address:

PARDO. LOREIX

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TOM BROTHERS, LLC

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ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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

FIRST:	The name of the limited liability company is: TOM BROTHERS, LLC		_
SECON	D: The articles of organization or the application to transact business		
(CH)	CK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA	<u>rement</u>	
i	Contains an Incorrect statement. The incorrect statement, the reason the stater ncorrect, and the corrected statement are as follows: The name of the Limited Liability Company shall be:	nent is	
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Dated:	Sept-hen 8th 2011	OF STATE	
	Signature of a member or authorized representative of a member	1	~
	TONANI, ATILIO JORGE , MGRM Typed or printed name of signee		
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)		
CR2E062	(08/05)		

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Electronic Articles of Organization For Florida Limited Liability Company

L11000099251 FILED 8:00 AM August 30, 2011 Sec. Of State nculligan

Article I

The name of the Limited Liability Company is: TOM BROTHERS, LLC

Article II

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

19380 COLLINS AVE. # 701 SUNNY ISLES BEACH, FL. US 33160

The mailing address of the Limited Liability Company is:

19380 COLLINS AVE. # 701 SUNNY ISLES BEACH, FL. US 33160

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:

FLORIDIAN TITLE GROUP INC 2999 NE 191 STREET PH8 AVENTURA, FL. 33180

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: LORENA A PARDO

Article V

The name and address of managing members/managers are:

Title: MGRM ATILIO JORGE TONANI 19380 COLLINS AVE.#701 SUNNY ISLES BEACH, FL. 33160 US

Title: MGRM MONICA NOEMI ENEI 19380 COLLINS AVE.#701 SUNNY ISLES BEACH, FL. 33160 US L11000099251 FILED 8:00 AM August 30, 2011 Sec. Of State nculligan

Article VI

The effective date for this Limited Liability Company shall be:

08/29/2011

Signature of member or an authorized representative of a member

Electronic Signature: ATILIO JORGE TONANI

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.