

08/21/2029 01:40

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**FLORIDA LIMITED LIABILITY CO.
CORPORACION TAHIMCA LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED
11 OCT 10 PM 12:44
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TALLAHASSEE, FLORIDA

B. BOSTICK

OCT 11 2011

EXAMINER

10/9/2011 12:26 PM

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

The name of the Limited Liability Company is:

CORPORACION TAHMCA 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:117 NW 42 Ave
MIAMI, FL 33126**Mailing Address:**117 NW 42 Ave
MIAMI, FL 33126**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:

TAHIA K. MACHADO RIVAS
Name117 NW 42 Ave
Florida street address (P.O. Box **NOT** acceptable)
MIAMI FL 33126
City, State, and ZipFILED
11 OCT 10 AM 8:40
CLERK OF STATE
TALLAHASSEE, FLORIDA

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..

Tahia K. Machado R.
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

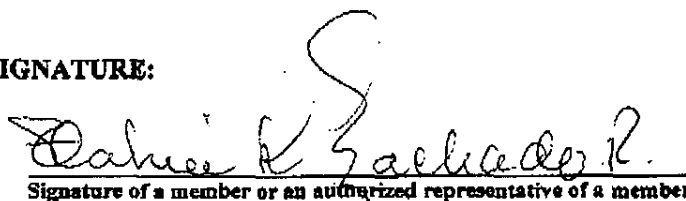
"MGRM" = Managing Member

Name and Address:MEMBER117 NW 42ave. Miami FL.
33120
TANIA K. MACHADO RIVAS.

(Use attachment if necessary)

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FILED
SECRETARY OF STATE
ALLAH SEE FLORIDA**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:

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

(In accordance with section 608.408(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.)

TANIA K. MACHADO RIVAS.

Typed or printed name of signer

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