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| PICK-UP WAIT MAIL |
| (Duninger Entity Name) |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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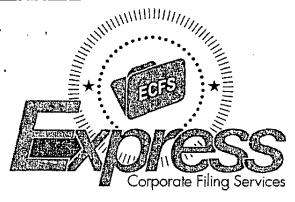
02/08/12-01027-002-#15500



D. BRUCE

MAR 0 7 2012

EXAMINER



1000 Ponce de Leon Blvd. Suite: 101 Coral Gables, FL 33134

Phone: 305 444 4994

Email-filing@ecfsfiling.com

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

| 1. | The Canero (Corporation Name) | Group, | LLC (Document #) | | |
|----|--|---------------------|-----------------------|-------------|----|
| 2. | (Corporation Name) | | (Document #) | | |
| 3. | (Corporation Name) | | (Document #) | | |
| 4. | (Corporation Name) Walk in Pick up time | | | 12 KAR | 17 |
| | Mail out Will wait | Photocopy | Certificate of Status | 7-6 建 | |
| | NEW FILINGS | AMENDMEN | is 25 | io E | Ĵ |
| - | Profit | Amendment | | | |
| - | NonProfit | Resignation of R.A. | , Officer/Director | | |
| | Limited Liability | Change of Registers | ed Agent | | |

| OTHER FILNGS |
|------------------|
| Annual Report |
| Fictitious Name |
| Name Reservation |

Domestication

Other

| REGISTRATION/ QUALIFICATION |
|--------------------------------|
| Foreign |
| Limited Partnership |
| Reinstatement |
| Trademark |
| Other |

Dissolution/Withdrawal

Merger

Examiner's Initials

To Division of Corporation ATTN: Deborah Bruce

Re: THE CANERO GROUP, LLC

I <u>Jose Canero</u> former owner of CANERO GROUP, LLC hereby release the name to myself to be used in the attached Articles of Organization THE CANERO GROUP, LLC. I further state I have intentions of reinstating the dissolved entity.

Thank you for your prompt attention in this matter,

Jose A. Canero (MGRM)

12 MAR - 6 MA + 24

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Al | RTI | \mathbf{CI} | \mathbf{F} | Τ. | Na | me: |
|----|-----|---------------|--------------|----|----|-----|
| | | | | | | |

The name of the Limited Liability Company is:

THE CANERO GROUP, 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:

Mailing Address:

9325 SW 68 Street Miami, FL 33173

9325 SW 68 Street Miami, FL 33173

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:

Name
9325 SW 68 Street

Florida street address (P.O. Box NOT acceptable)

Miami, FL 33173

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..

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

| <u>Title:</u> "MGR" = Manager | Name and Address: |
|---|--|
| "MGRM" = Managing Membe | er |
| MGR / MGRM | Jose A. Canero 9325 SW 68 Street |
| | Miami, FL 33173 |
| | |
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| | |
| W. A. W. C. | |
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| (Use attachment if necessary) | · |
| | an the date of filing:(OPTIONAL) |
| LE V: Effective date, if other the fective date is listed, the date is | nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days p |
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| LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE: | nust be specific and cannot be more than five business days p |
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| LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE: Signature of the date of filing. | nust be specific and cannot be more than five business days p |
| LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE: Signature of the date of filing. | nember or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are the einformation submitted in a document to the Department of States. |

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

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)