

MAR/26/2012/MON 11:56 AM

FAX No.

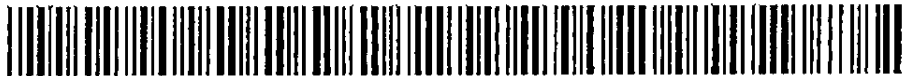
P.001

L12000041701

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000078182 3)))



H120000781823ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : EXPRESS CORPORATE FILING SERVICE  
Account Number : I20000000146  
Phone : (305) 444-4994  
Fax Number : (305) 444-4977

INC.

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

Email Address: \_\_\_\_\_

RECEIVED  
12 MAR 26 PM 12:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.  
FORTUNE TECHNOLOGIES GROUP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

B. KOHR

MAR 26 2012

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 MAR 26 PM 4:40

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY**

FILED STATE  
SECRETARY OF CORPORATION  
DIVISION OF CORPORATION  
12 MAR 26 PM 4:40

**ARTICLE I- Name**

The name of the Limited Liability Company is:

FORTUNE TECHNOLOGIES GROUP, LLC

**ARTICLE II- Address:**

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

Principal Office Address

10620 SW 146 CT  
MIAMI FLORIDA 33040

**ARTICLES III** Register Agent, Register Office & Register 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 REGISTER AGENT ARE:

SANDRA C. GONZALEZ  
7105 SW 8 STREET SUITE 306  
MIAMI FLORIDA 33144

Having been named as register 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 register 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 register agent as provided for in Chapter 608 FS



REGISTER AGENTS SIGNATURE ( REQUIRED)

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY**

**ARTICLES IV- Manager {s} or Managing Member {s}**

Title:

Name and Address:

"MGRM" = Manager

**ERNA M AGUIRRE  
7100 NW 8 STREET SUITE 306 MIAMI FLORIDA 33144**

(Use attachment if necessary)

ARTICLE V: effective date, if other than the date 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 filing)

REQUIRED SIGNATURE:

Erna Maguirre Palacios:

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 and affirmation under the penalties of perjury  
that the facts stated herein are true)

**ERNA M AGUIRRE**