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.

(((H12000090163 3)))



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 : GREENSPOON MARDER, P.A.

Account Number : 076064003722 Phone : (888)491-1120

Fax Number : (954)343-6962

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

Email	Address:				

FLORIDA LIMITED LIABILITY CO.

IJA CIMENT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION

OF

UA CIMENT, LLC

FILED

12 APR II AM 7: 47

SECRETARY OF STATE
TALLARYSSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is IJA CIMENT, LLC.

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall begin with the filling of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 4925 Collins Avenue, #2A, Miami Beach, FL 33140.

ARTICLE IV - Registered Agent:

The name and address of the initial registered agent for this Limited Liability Company is Norman Ciment, 4925 Collins Avenue, #2A, Miami Beach, FL 33140.

ARTICLE V - Management:

The Limited Liability Company is to be managed by a manager or managers and the name and address of the initial manager who is to serve as manager is:

Norman Ciment, 4925 Collins Avenue, #2A, Miami Beach, Florida 33140.

Whereof, the undersigned authorized representative of the member has executed these Articles the Walday of Walday of _______, 2012.

NORMAN CIMENT

Authorized Representative of Member

FILED

12 APR 11 All 7: 47

SECHETAVE OF STATE TALLAMASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

IJA CIMENT, LLC

2. The name and address of the registered agent and office is:

NORMAN CIMENT 4925 Collins Avenue, #2A Miami Beach, FL 33140

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.

NORMAN CIMENT Registered Agent

Date: Much 25h, 201