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

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
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FLORIDA LIMITED LIABILITY CO.  
JORDIMAR, LLC

Certificate of Status	0
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Page Count	02
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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

JORDIMAR, LLC

**ARTICLE II ADDRESS**

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


2851 NE 183RD STREET # 502  
AVENTURA, FLORIDA 33160

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:

JORGELINA GHIOLDI  
2851 NE 183RD STREET # 502  
AVENTURA, FLORIDA 33160

Having been named as registered agent 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..

X   
\_\_\_\_\_  
JORGELINA GHIOLDI / Registered Agent's signature

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**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a Manager Managed Company.

**ARTICLE V MANAGERS**

MANAGER:

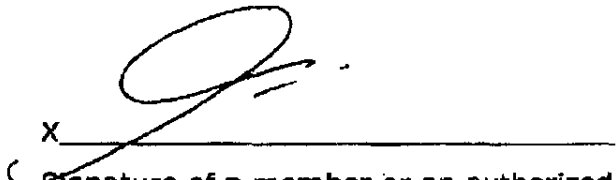
JORGELINA GHIOLDI  
2851 NE 183RD STREET # 502  
AVENTURA, FLORIDA 33160

MANAGER:

DIEGO MARIANO NUNO  
2851 NE 183RD STREET # 502  
AVENTURA, FLORIDA 33160

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\*\*\*\*\*

X 

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.

JORGELINA GHIOLDI

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