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.

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TO:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973 Fax Number : (305)220-1440

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. URBAN CORPORATE MANAGEMENT LLC.

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

C. LEWIS

SEP 1 4 2012

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTI	CT	E I	[_ N	luma.
AKII	LL.	ar i	l - I	име:

The name of the Limited Liability Company is:

URBAN CORPORATE MANAGEMENT LLC.

(Must emd 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:

10545 SW 95 OVE SAME MUMMI, FIZ 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:

ARNALDO CARMOUZE

1820 SW 72 ST #102

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

M(0m1, C1 FL 33(73

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)

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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2012 SEP 13 AM 7: 49

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	ARNALDO CARMOUZE 6545 SW 95 ANE MIAMI FL 33173
MGRM	JULIO LORA 431 LE JEUNE RO NW MIAMI FL 33126
MGRM	JORGE GOMEZ 400 ARTHUR GODFREY RD PHT MIAMI FL 33140
(Use attachment if necessary)	
TICLE V: Effective date, if other that an effective date is listed, the date in or 90 days after the date of filing.)	ust be specific and cannot be more than five business days prior
REOUIRED SIGNATURE:	
Signature of a n	nember or an authorized representative of a member.
constitutes an affirmation	on 608.408(3), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

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Typed or printed name of signee

constitutes a third decree felony as provided for in s.817 155 E S)

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