

08/12/2030

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Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
CORPORACION NEXT 2010 LLC**

Certificate of Status		1
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Corporate Filing Menu

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SEPTEMBER 28TH 2012

Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of CORPORACION NEXT 2010 LLC
of Doc # L12000059452 are the same owners of the attached
articles of incorporation. We have dissolved the company and have no intention
of reopening it. Thank you for your help in this matter.

Very sincerely,

Roberto A. Ponce

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CORPORACION NEXT 2010 LLC

(Must end with the words "Limited Liability Company, "LLC," 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:5121 NW 79 AVE
Unit 11
DORAL FL 33166

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:

ROBERTO Di PRIMA

Name

5121 NW 79 AVE Unit 11Florida street address (P.O. Box **NOT** acceptable)DORAL FL 33166

City, State, and Zip

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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.

Roberto Di Prima

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

Title:

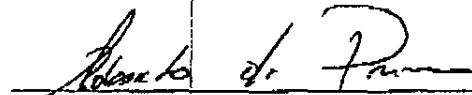
"MGR" = Manager

"MGRM" = Managing Member

MGRM**Name and Address:**ROBERTO Di PRIMA
5121 NW 79 AVE UNIT 11
DORAL FL 33166

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of 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 of filing.)

REQUIRED SIGNATURE:

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.156, F.S.)

ROBERTO Di PRIMA

Typed or printed name of signee

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 ALACHUA COUNTY, FLORIDA

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