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SECRETARY OF STATE

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COVER LETTER

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то:	Registration Section Division of Corporat	ions *	•	. v	3 E.	¥*.		
		C	oren	t H.C				
SUBJ	SUBJECT: Corent, LLC Name of Limited Liability Company							
The e	nclosed Articles of Organ	ization and fee(s) are	submitt	ed for filing.				
Please	e return all correspondenc	e concerning this ma	iter to th	e following:		•		
		ال	uan (Correa				
			Name	of Person				
			:orer	nt II C				
	Corent, LLC Firm/Company							
		4047	r 0 -	K OLJE D.	1			
		1617		If Club Ro	1., #	112		
			Au	uress				
				FL 33326				
			-	and Zip Code				
	F-m	cor ail address: (to be used		@live.com	tification)			
English				•	,			
ror tu	rther information concert	nng this matter, pieas	e can:					
	Juan Cor	rea	at (954 ,	5	594-5156		
	Name of Perso	n	_ ''' \	Area Code & D	aytime Te	lephone Number		
E. J.	and for a character Constant	.16.						
	sed is a check for the f	•						
\$125.0		0.00 Filing Fee & tifficate of Status	C	55.00 Filing Fortified Copy ditional copy is e	'	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	Regi Divi P.O.	stration Section sion of Corporations Box 6327 shassee, FL 32314		Street/Courie Registration S Division of C Clifton Buildi 2661 Executiv Tallahassee, I	ection orporationing orgeneering	ns		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ā	RT	ľΙĆ	1.F	I -	Na	me:

The name of the Limited Liability Company is:

Corent, LLC (Must end 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:
16175 Golf Club Rd., # 112	16175 Golf Club Rd., # ルン
Weston, FL 33326	Weston, FL 33326

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:

Juan C	orrea
Name	
16175 Golf	Club Rd., #1/2
Florida street ad	dress (P.O. Box NOT acceptable)
Weston	FL 33326
City, St	tate, and Zip

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)

Page 1 of 2

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

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

Juan Correa 16175 Golf Club Rd., 井 リン Weston, FL 33326	
16175 Golf Club Rd., 井 112	
16175 Golf Club Rd., 井 112	
1103(01), 1 & 00020	
•	
late of filing: (OPTIONAL)	
specific and cannot be more than five business days prio	r
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SECRETA TALLAHA	<u> </u>
AHASS =	7117
or an authorized representative of a member.	דורבט
or an authorized representative of a member.	
or an authorized representative of a member. 108(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.	
or an authorized representative of a member.	
	late of filing: (OPTIONAL) specific and cannot be more than five business days prior

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)