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COVER LETTER

TO: Registration Section
Division of Corporations

F.F. Services, LLC.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Feliciano Andres Fernandez Name of Person

F.F. Services, LLC

Firm/Company

1418 NW 103rd Street

Address

Miami, FL. 33147

City/State and Zip Code

felicianofernandez1@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Feliciano Fernandez

,786

2673084

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

■\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Majling Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	
The name of the Eminted Elability Company i	s:
F.F. Services, LLC.	·
(Must end with the words "Limited Lis	bility 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:
1418 NW 103rd Street	1418 NW 103rd Street
Miami, FL. 33147	Miami, FL. 33147
The name and the Florida street address of the Feliciano Andres Fernandez Nan	
1418 NW 103rd Street	address (P.O. Box NOT acceptable)
Miami, FL, 33147	
Miami, FL. 33147 City,	FLState, and Zip
City, Having been named as registered agent and t liability company at the place designated it registered agent and agree to act in this cap all statutes relating to the proper and comp	
City, Having been named as registered agent and t liability company at the place designated it registered agent and agree to act in this cap all statutes relating to the proper and comp	State, and Zip o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of lete performance of my duties, and I am familiar with registered agent as provided for in Chapter 608, F.S

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	
MGR	Miguel Angel Gonzalez
	2510 SW 102nd Avenue
	Miami, FL. 33165

(Use attachment if necessary)	
LE V: Effective date, if other th	an the date of filing: 01/28/2013 . (OPTION
effective date is listed, the date or 90 days after the date of fili	must be specific and cannot be more than five busin

REQUIRED SIGNATURE:

Signature of a member of 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.817.155, F.S.)

Miguel Angel Gonzalez

Typed or printed name of signee

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)