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(((H13000088902 3)))

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To:

Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I2000000019 : (305)552-5973

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FLORIDA LIMITED LIABILITY CO. MIAMI UNIVERSAL INVESTMENT, LLC

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April 22, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS CORPORATE

SUBJECT: MIAMI UNIVERSAL INVESTMENT LLC

REF: W18000023355

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The complete document was not received. Please refax the complete document, including the electronic filing cover sheet.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filling of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H13000088902 Letter Number: 613A00009560

13 APR 22 PM 12: 03
SECRETARY OF STATE
ALL AHASSEE, FLORID

H13000088902

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	,
The name of the Limited Liability Company is:	
Miami UnivERSal (Must end with the words "Limited Liability	INVESTMENT, LLC
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1884 SW 57th AVE Miami FL 33155	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	cred Agent. You must designate an individual or another
The name and the Florida street address of the r	egistered agent are:
VICENTE F.	Franco 27 27 27 27 27 27 27 27 27 27 27 27 27
1884 SW	57 Th AVE ITS NOT acceptable)
<u>Miami</u>	<u>R</u> 33155 ≈ 20 %
City, State, a	mo vih

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

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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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: _ (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.) Typed or printed name of signee

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