Division of Corporations

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FLORIDA LIMITED LIABILITY CO. MARCIMEL LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

MAY 1 7 2013

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	•
The name of the Limited Liability Co	ompany is:
MARCIMEL LLC	
(Must end with the words	Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street addre	ss of the principal office of the Limited Liability Company is:
Principal Office Address	Mailing Address

Timerpar Office Address.	Mannig Additos.
750 MYRTLEWOOD LANE	750 MYRTLEWOOD LANE
KEY BISCAYNE, FL 33149	KEY BISCAYNE, FL 33149

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 stree		ಹ		
MIGUEL A	HERNANDEZ, CPA		HA!	71
	HSSH MAY	<u>~</u>	=	
8500 WEST FLAGLER STREET, SUITE B208 Florida street address (P.O. Box NOT acceptable)			*	ED
MIAMI	FL 33144	EL CRID		
City, State, and Zip			သ္	

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.

(CONTINUED)

Agoni's Signature (REQUIRED)

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: Title: Name and Address: 1 "MGR" = Manager"MGRM" = Managing Member MGRM CATIMEL LLC 1060 BRICKELL AVENUE #3811 MIAMI, FL 33131 (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:

Elquature of remember or an abitiorized representative of a member. (In accordance with section 638.408(3), Piorida Stantes, 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 follows as provided for in \$,817.155, F.S.)

Imeldo Victor Jayler Viagarra

Typed or printed name of signer