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FLORIDA LIMITED LIABILITY CO. RAFAEL RAMON, LLC

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D. BRUCE

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: RAFAEL RAMON, 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: 7130 MILLER DRIVE ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatures (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: 7130 MILLER DRIVE Florida street address (P.O. Box NOT acceptable) MIAMI FL 33155 City, State, 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)

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Page 1 of 2

The name and a Title:	Manager(s) or Manag	aging Member(s): er or Managing Member is as follows: Name and Address:	
"MGR" = Mana "MGRM" = Ma	ger naging Member	•	
MGRM	<u>l</u> ; · · · ·	PAFAEL HUGUET S 7130 MILLER BRUET MIAMIL FL 33/55	<u> </u>
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(Use attachmen	t if necessary)		
LEV: Effective	e date, if other than the isted, the date must b	e date of filling: (O we specific and cannot be more than five bus	PTIONAL) iness days prior
REQUIRED S	IGNATURE:		SEURETARY
:	Signature of a memb	er or authorized representative of a member.	mo
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Typed or printed name of signee

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