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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

my fi, llc

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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I

The Name of the Limited Liability Company shall be :

MY FI, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the at.

ARTICLE III

The mailing address and street address of the principal office of the limited liability company is: 1444 BISCAYNE BLVD #208, MIAMI, FL 33132

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ARTICLE IV

The name of the Managing Member and Manager(S) shall be:

MANAGING MEMBER

JORGE MEZZARA 33.34%
1444 BISCAYNE BLVD #208
MIAMI, FL 33132

MANAGER

SANTIAGO GARCIA ARENAL 33.33%
1444 BISCAYNE BLVD #208
MIAMI, FL 33132

MANAGER

GUILLERMO L. DIEZ 33.33%
1444 BISCAYNE BLVD #208
MIAMI, FL 33132

ARTICLE V

The name and Florida street address of the registered agent shall be:

JORGE MEZZARA
1444 BISCAYNE BLVD #208
MIAMI, FL 33132

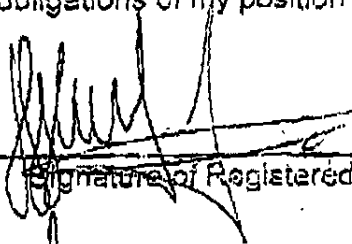
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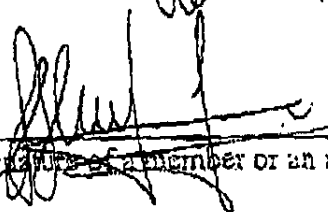
CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE

My Fi, LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.



Signature of Registered Agent



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.)

Jorge Merradva
Typed or printed name of signer

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TALLAHASSEE FLORIDA

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