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COVER LETTER

TO:

Registration Section

Di	vision of Corporations
SUBJECT	SODO HOLDINGS LLC
	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	RON SOTOMAYOR
	Name of Person
	Firm/Company
	544 Lanark Court
	Address
	Orlando, Florida 32806
	City/State and Zip Code
	watermuz@msn.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
RON S	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fil	ling Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \ \text{Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ Certified Co
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SODO	HOLDINGS LLC
(Must end w	ith the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address and office Address:	dress of the principal office of the Limited Liability Company is: Mailing Address:
544 Lanark Court	544 Lanark Court
Orlando, FL 32806	Orlando, FL 32806

The name and the Florida street address of the registered agent are:

RON SOTOMAYO	R				
Nam	ne				
544 Lanark C	ourt				
Florida street address (P.O. Box NOT acceptable)					
Orlando	FL 32806				
City	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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

"MGR" = Manager	nber	
_ MGR	RON SOTOMAYOR	
	544 Lanark Court	_
	Orlando, FL 32806	_
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	*****	_
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		_ _
(1)		
(Use attachment if necessar)	
TICLE V: Effective date, if other in effective date is listed, the data date of filing.)	than the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or	· 90 days a
n effective date is listed, the data ate of filing.)	must be specific and cannot be more than five business days prior to or	90 days a
n effective date is listed, the date of filing.) ICLE VI: Other provisions, if an REQUIRED SIGNATUR	must be specific and cannot be more than five business days prior to or	• 90 days at
REQUIRED SIGNATUR (In accordance constitutes an I am aware the	must be specific and cannot be more than five business days prior to or	ent 2
REQUIRED SIGNATUR (In accordance constitutes an I am aware the	ure of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this docum ffirmation under the penalties of perjury that the facts stated herein are true any false information submitted in a document to the Department of State	ent 28
REQUIRED SIGNATUR (In accordance constitutes an I am aware the	ure of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this docum ffirmation under the penalties of perjury that the facts stated herein are true any false information submitted in a document to the Department of State irid degree felony as provided for in s.817.155, F.S.)	2014 JAN 27
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REQUIRED SIGNATUR (In accordance constitutes an I am aware the constitutes a testing).	ure of a member or an authorized representative of a member. vith section 605.0203 (1) (b), Florida Statutes, the execution of this documn ffirmation under the penalties of perjury that the facts stated herein are true any false information submitted in a document to the Department of State ird degree felony as provided for in s.817.155, F.S.) RON SOTOMAYOR Typed or printed name of signee Filing Fees: ticles of Organization and Designation of Registered Agent	2014 JAN 27

The name and address of each person authorized to manage and control the Limited Liability Company:

Name and Address:

ARTICLE IV-