

03/22/2032 23:07

L1400 0076779

#4271 P.002/004

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000111782 3)))



H140001117823ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

****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.
POINT3, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED

14 MAY 12 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 MAY 12 AM 8:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

J. Shivers MAY 13 2012

H14000111782

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Point3, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:8195 NW 68 StreetMiami, Florida 33166**Mailing Address:**8195 NW 68 StreetMiami, Florida 33166**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 street address of the registered agent are:

Luis Felipe Gomez

Name

8195 NW 68 StreetFlorida street address (P.O. Box NO acceptable)MiamiFL 33166

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 MAY 12 AM 8:15

FILED

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

H14000111782

ARTICLE IV- Manager(s) or Managing Member(s):

H14000111/82

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Luis Felipe Gomez

8195 NW 68 Street

Miami, Florida 33166

MGRM

Oscorp Group, LLC

8195 NW 68 Street

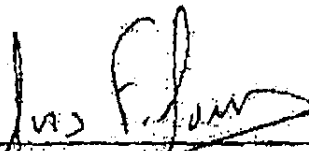
Miami, Florida 33166

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: May 7, 2014 (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:



Signature of a member or an authorized representative of a member

(In accordance with section 605 Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Luis Felipe Gomez

Typed or printed name of signer

FILED
14 MAY 12 AM 8:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H14000111782