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## **COVER LETTER**

Division of Corporations		
SUBJECT: Underdog Electronics LLC Name of Lin	nited Liability Company	
The enclosed Articles of Organization and fee(s) ar	re submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Manuel I Pena	Name of Person	
Underdog Electronics, LLC	Firm/Company	
	Pillib Company	
12265 SW 99 Street	Address	
Miami, FL 33186	ity/State and Zip Code	
info@underdogelectronics.com E-mail address: (to be used	d for future annual report notifica	ition)
For further information concerning this matter, plea	ase call:	
Manuel I Pena at (3  Name of Person		ephone Number
Enclosed is a check for the following amount:		
☑ \$125.00 Filing Fee	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Underdog Electronics, 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 pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12265 SW 99 Street Miami, FL 33186	12265 SW 99 Street Miami, FL 33186
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as another business entity with an active Florida re The name and the Florida street address of the re	its own Registered Agent. You must designate an individual or gistration.)
Amparo Silva Pena	
	Name
<u>12265 SW 99 Street</u> Florida street address (1	P.O. Box NOT acceptable)
Miami	FL 33186
the place designated in this certificate, I here capacity. I further agree to comply with the pro-	Zip  accept service of process for the above stated limited liability company at by accept the appointment as registered agent and agree to act in this ovisions of all statutes relating to the proper and complete performance of the obligations of my position as registered agent as provided for in Chapter 605, F.S  ('s Signature (REQUIRED)
(CO	ONTINUED)

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DARKSON A 1 1 12 2 1	Name and Address:
"AMBR" = Authorized Member	· · · · · · · · · · · · · · · · · · ·
"MGR" = Manager	
AMBR	Manuel I Pena
	12265 SW 99 Street
	Miami, FL
AMBR	Manuel A Diaz
<del>-</del> -	6001 NW 114 Court #134
	Doral, FL 33178
AMBR	Juan M Herrera
	6930 NW 186 Street #303
	Hlaleah, FL 33015
(Use attachment if necessary)	
LE V: Effective date, if other than the date of f fective date is listed, the date must be specified of filing.)	filing: (OPTIONAL) ic and cannot be more than five business days prior to or 90 days aft
LE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	P

Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, 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 felony as provided for in s.817.155, F.S.)

Manuel I Pena
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-

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