

Jun 12 14 01:47p
6/12/2014

Pembroke Falls

9544363123

p.1

L14000095112
Division of Corporations
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.

(((H14000139833 3)))



H140001398333ABC%

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

RECEIVED

14 JUN 12 PM 3:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

From: Account Name : MARTA F DIAZ CPA LLC
Account Number : I2C140000050
Phone : (954) 499-2829
Fax Number : (954) 436-3123

FILED
14 JUN 12 PM 3:48
TALLAHASSEE, FLORIDA

****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.
ANDREMED LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

JUN 13 2014

S. YOUNG

ARTICLES OF ORGANIZATION
OF
ANDREMED LLC

The Undersigned, as a member or an authorized representative of a member of the Company, pursuant to Chapter C05, Florida Statutes, files the following Articles of Organization establishing a Florida Limited Liability Company named **ANDREMED, LLC**

ARTICLE I: NAME

The name of the Company shall be: ANDREMED, LLC

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this Company shall be:

2250 NW 136 AVE, PEMBROKE PINES, FL 33028

ARTICLE III: DURATION

The period of duration for the Company shall be perpetual.

ARTICLE IV: PURPOSE

This company is organized primarily to engage in general investments, international trade, and other commercial activities, as well as to conduct any other lawful business in the United States and abroad.

ARTICLE V: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida Street address of the initial Registered Agent is:

JORGE CHAKIRA 2250 NW 136 Ave, Pembroke Pines, Fl. 33028

Having been named as registered agent and to accept service of process for the above stated 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.

Signature of Registered Agent
JORGE CHAKIRA

Date: June 2, 2014

FILED
14 JUN 12 14 13
TALLAHASSEE
FLORIDA

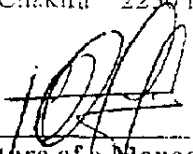
ARTICLE VI: MANAGEMENT

The Company shall be managed by one or more members and is therefore a member-managed company. The initial member-manager of the Company shall be its only member to hold office until her successors have been duly qualified and elected, or until his/her earlier resignation, removal from office or death.

The number of members and managers may increase or decrease in accordance with the procedure stated in the By-Laws of the company or the Membership Agreement.

The name and address of the initial Manager is:

Jorge Chakira 2250 NW 136 Ave Pembroke Pines, FL 33028



Signature of a Manager

Jorge Chakira

FILED
14 JUN 12 10 41 PM
SECRET
FALLA, FL