

# L14000103755-

Division of Corporations  
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From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
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**FLORIDA LIMITED LIABILITY CO.  
CARIB ENTERPRISE GROUP LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
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JUN 30 2014  
A. LUNT

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June 27, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: CRIB ENTERPRISE GROUP LLC  
REF: W14000040160

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Only one person can serve as "Registered Agent".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt  
Regulatory Specialist II

FAX Aud. #: R14000154139  
Letter Number: 214A00014049

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")*

CARIB Enterprise Group LLC

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**ARTICLE II - Address:**

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

1800 N Bayshore Dr. 2512, Miami, FL 33132

**ARTICLE III - Registered Agent, Registered Office:**

The name and the Florida street address of the registered agent are: *(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.)*

Irene Velez  
1800 N Bayshore Dr. 2512, Miami, FL 33132

**ARTICLE IV-**

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

Carmen Muniesa Rodriguez (MGR)  
Irene Velez (MGR)

**Required Signatures:**

*[Handwritten signature]* *[Handwritten signature]*

**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.

*Carmen Muvica Rodriguez* *Irene Velaz*

**Typed or printed name of signee**

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..

*[Handwritten signature]*

**Registered Agent's Signature (REQUIRED)**

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