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

From: Account Name : CLARA GIRALDO, P.A.  
Account Number : 119990000017  
Phone : (305) 485-9300  
Fax Number : (305) 485-1098

\*\*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.  
THERMO GROUP ENTERPRISES, LLC.

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
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J. Shivers JAN 06 2015

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY  
OF

**THERMO GROUP ENTERPRISES, LLC.**

ARTICLE I - NAME

The name of the Limited Liability Company is:

**THERMO GROUP ENTERPRISES, LLC.**

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**15753 SW 60 ST  
MIAMI, FL. 33193**

The mailing address shall be:

**15753 SW 60 ST  
MIAMI, FL. 33193**

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:

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

**MIGUEL ANGEL ORDAZ CARVAJAL**

**15753 SW 60 ST**

Florida street address ( P.O.BOX NOT acceptable)

**MIAMI, FL. 33193**

City, State, and Zip

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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

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**MIGUEL ANGEL ORDAZ CARVAJAL**  
15753 SW 60 ST  
MIAMI, FL. 33193

**MANAGER**

**IVON HERMINIA VELASQUEZ DE ORDAZ**  
15753 SW 60 ST  
MIAMI, FL. 33193

**MANAGER**

(An additional article must be added if an effective date is requested)



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.)

**MIGUEL ANGEL ORDAZ CARVAJAL**

Typed or printed name of signee

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