06:20

#0345 P.001/003

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H15000237252 3)))



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FLORIDA LIMITED LIABILITY CO. MAC & WIN SERVICES LLC

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Tax 10:47-5218956

ARTICLE I - Namer

The name of the Limited Liebility Company is: (Must end with the morth Timited Liebility Company,

MAC & WIN SERVICES LLC

ARTICLE II - Address:

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

14335 &W 120 STREET SLITE 211

Miami FL. 33186

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Liability Company common serve as its oran Registered Agent. You must designate an individual or another business ending with an active Florida registration.)

GENERAL CONSULTING SERVICES GROUP COM

14335 SW 120 STREET SUITE 211

Miani FL : 33/86

ARTICLE IV-

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

MIGUEL A SALAZAR M

MGRM

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Required Signatures:

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.

MIGUEL A SALAZAR MERM

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 cartificate, I hereby accept the appointment as registered agent and agree to acr 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 Christer 505, F.S.

Registered Agent's Signature (REQUIRED)

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