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Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
MGS BROTHERS, LLC**

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 OCT 21 AM 2:06

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MGS Brothers, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

5635 Arbor Lane
Coral Gables, Florida 33156

5635 Arbor Lane
Coral Gables, Florida 33156

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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.)

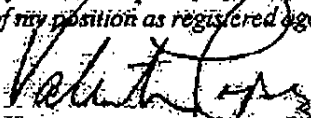
The name and the Florida street address of the registered agent are:

Valentin Lopez c/o Lopez & Partners LLC
Name

2600 S. Douglas Road, Suite 811
Florida street address (P.O. Box **NOT** acceptable)

Coral Gables FL 33134
City, State, and Zip

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 608, F.S.



Registered Agent's Signature (REQUIRED)

15 OCT 2015 2:05
STATE OF FLORIDA
FALLA

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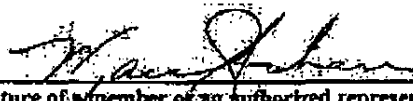
ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
<u>MGRM</u>	Camilo Gutierrez 5835 Arbor Lane Coral Gables, Florida 33158
<u>MGRM</u>	Maria Stanham 5835 Arbor Lane Coral Gables, Florida 33158

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: October 21, 2015 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Maria Stanham

Typed or printed name of signee

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