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FLORIDA LIMITED LIABILITY CO. "SUACAM GROUP, LLC

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H16000091217

AKTYCLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liab	bility Company is:		
SUAÇAM GROL			
(Must e	end with the words "Limited	Liability Company	r, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stro	et address of the principal of	fice of the Limited	Liability Company is:
Prin	cipal Office Address:		Mailing Address:
3850 S.W. 87th A	Agent, Registered Office, c	k Registered Age	nt's Signature:
3850 S.W. 87th A Miami, Dade, Flo Miami, Dade, Flo Registered The Limited Liability Compnother business entity with	orids 33165 Agent, Registered Office, e	& Registered Agent. Registered Agent.	
3850 S.W. 87th A Miami, Dade, Flo Miami, Dade, Flo Registered The Limited Limbility Compnother business entity with	Agent, Registered Office, of any cannot serve as its own an active Florida registration	& Registered Agent. Registered Agent. 1.) agent are:	nt's Signature:
3850 S.W. 87th A Miami, Dade, Flo Miami, Dade, Flo Registered The Limited Liability Compnother business entity with	Agent, Registered Office, of any cannot serve as its own an active Florida registration eet address of the registered	& Registered Agent. Registered Agent. 1.) agent are:	nt's Signature:
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3850 S.W. 87th A Miami, Dade, Flow Miami, Dade, Flow RTICLE III - Registered The Limited Limbility Companother business entity with	Agent, Registered Office, of any cannot serve as its own an active Florida registration eet address of the registered VICTOR, M. SUARE 3850 S.W. 87th Aven	& Registered Agent. Registered Agent. 1.) agent are: EZ, ESO. Name ue, Suite 203 (P.O. Box NOT a	nt's Signature: You must designate an individual or

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.

Page 1 of 2

(CONTINUED)

Registered Agent's Signature (REQUIRED)

3052201440

H16000091217

Title:		Name and Address:	
"AMBR" = Author "MGR" = Manager			
VICTOR M. SUA		3850 S.W. 87th Avenue, Suite 203 Miami-Dade, Florida 33165	
		Miami-Dade, Piorida 33103	
FEDERICO A. GO	ดิปต	3850 S.W. 87th Avenue, Suite 203	
		Miami-Dade, Florida 33165	
			
(Use attachment if)			
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