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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. ACKERMAN CONSULTING LLC

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S. GILBERT

H16000166104

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Li	ability Company is:			
ACKERMA	N CONSU	LTING	LLC	
(Must end with	the words "Limited Liabil	ity Company, "L.	L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and str	eet address of the pr	rincipal office	of the Limite	d Liability Company is:
Principal Office Address:		Mailing A	ddress:	
1201 RAVEN Miami SRINGS FL	AVE 33166			
ARTICLE III - Registered (The Limited Liability Company can business entity with an active Florid The power and the Florida et	not serve as its own Registation.)	tered Agent, You	must designate an	ent's Signature:
The name and the Florida st	reet address of the r	registered age	nt are:	25
MAI	CIA ROXANA	ESCO BA	R	
	Name			量加
1201	RAUEN AUE			7:47
Florida	street address (P.O	. Box <u>NOT</u> a	cceptable)	57. 5

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 REQUIRED

(CONTINUED)

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H16000166104

<u>Fitle:</u>	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	•
"AMBE"	JORGE L. ESPIND
•	
AMBR	MARIA ROXANA ESCOBAR
(Use attachment if necessary)	
SV: Effective date, if other than the da ective date is listed, the date must be:	ate of filing:
EV: Effective date, if other than the date date is listed, the date must be soffling.)	
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EV: Effective date, if other than the date letter date is listed, the date must be sof filling.) EVI: Other provisions, if any. REOUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date cutive date is listed, the date must be a filling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a filling accordance with section	member or an authorized representative of a member.
E V: Effective date, if other than the date cutive date is listed, the date must be a filling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a in (In accordance with section constitutes an affirmation)	member or an authorized representative of a member. In 1605.0203 (1) (b). Florida Statutes, the execution of this document aunder the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the date cutive date is listed, the date must be a filling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a gardened with section constitutes an affirmation I am aware that any false	member or an authorized representative of a member. In the first state of the penalties of perjury that the facts stated herein are true. It information submitted in a document to the Department of State
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