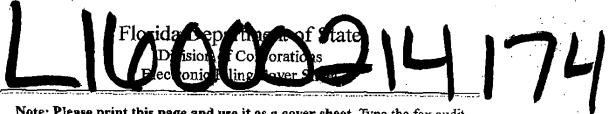
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(((H16000291100 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

: LAZARUS CORPORATE FILING SERVICE, INC. Account Name

Account Number : I2000000019

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA LIMITED LIABILITY CO. SAC IN VOGUE LLC

Certificate of Status	1
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Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "LLC," or "UC.") SAC In VOGUE LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 8894 Sw 129 th Ter Hiami (FL 33176)
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (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.) Francisco Javier Porto Vivas 8894 Sw 12977 Ter Miami FL 33174
ARTICLE IV- The name and title of each person authorized to manage and control the Lindled S. Liability Company: (AMBB) Ruben Colange Pulguert (AMBB)

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Required Signatures:

La Carrier Seal D

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 dominent constitutes an allieurition under the penalties of perjuty that the facts stated becomes 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 \$.817.155, F.S.

Typed of 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 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 distinct 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 (REOUIRED)