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Division of Corporations

Fax Number

: (850)617-6381

From:

: LAZARUS CORPORATE FILING SERVICE, INC. Account Name

Account Number : 120000000019

Phone : (305)552-5973 Fax Number : (305)675-5944

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FLORIDA LIMITED LIABILITY CO. RAINBIZ LLC

Certificate of Status	1
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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 "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 8567 Cora (use 4453
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 8567 Coral way 4453
The mailing address and street address of the principal office of the Limited Liability Company is: 8567 Coral way 77453
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.) Timmy De Ja Fe
8567 (ORAL WAY #453
The name and title of each person authorized to manage and control the Limited Liability Company: Timmy DE LA FE The control of the Limited Service of the
32 SA CA 2 S 2 A CA

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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.

Jimmy DE LA FE.

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 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)