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Florida Department of State
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To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : CORPOLICENSE, INC
Account Number : I20050000118
Phone : (305) 774-9606
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**FLORIDA LIMITED LIABILITY CO.
GENESIS PRIME ROOFING, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 MAY -5 AM 10:28

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MAY 08 2017

K. Brumbley

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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY
OF
GENESIS PRIME ROOFING, LLC**

ARTICLE I - NAME:

The name of the Limited Liability Company Is:

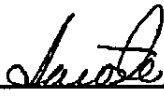
GENESIS PRIME ROOFING, LLC

ARTICLE II - ADDRESS:

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

**13285 SW 39th Street
Miami, FL 33175**

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



**Isabel Acosta
13285 SW 39th Street
Miami, FL 33175**

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17 MAY -5 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

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ARTICLE IV - Management/Member(s):

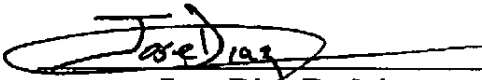
The name and address of each Manager or Managing Member is as follows:

TITLE: NAME AND ADDRESS

**AMBR Isabel Acosta
13285 SW 39th Street
Miami, FL 33175**

**AMBR Jose Diaz Rodriguez
13285 SW 39th Street
Miami, FL 33175**

**MBR Elias Reyes
13285 SW 39th Street
Miami, FL 33175**


**Jose Diaz Rodriguez
Authorized Manager Member**

(In accordance with section 605.0201 , Florida Statutes,
The execution of this document constitutes an affirmation under
The penalties of perjury that the facts stated herein are true)

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