01/03

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000282636 3)))



H170002828383ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I2000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

| Email | Addres: | 5: | |
|-------|---------|----|--|
|-------|---------|----|--|

FLORIDA LIMITED LIABILITY CO. RRR USA LLC

| Certificate of Status | 1 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$130.00 |

17 OCT 26 PM 2: 48

Electronic Filing Menu

Corporate Filing Menu

Help

H17000282636

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: |
|--|
| The hame of the Limited Liability Company is: (Must end with the words "Limited Liability Company" LLC." or "LLC.") |
| |
| RRR USA LLC |
| ARTICLE II - Address: |
| The mailing address and street address of the principal office of the Limited Links !! |
| 30 many 12 12777 C. 1 1C0 C1 |
| -19th 5W-190 ST # 3001 |
| MIAMI F/ 33177 |
| The state of the s |
| |
| ARTICLE III - Registered Agent, Registered Office: |
| The name and the Florida street address of the registered agent are one to a second |
| Company cannot serve as its own Registered Agent. You must designate an individual or another business en with an active Florida registration.) |
| O O O O O O O O O O O O O O O O O O O |
| KOBO R KOBSON, |
| 13727 Sw 152 St # 300 |
| Miami FL 33177 |
| A DUTY OF TO MY |
| ARTICLE IV- |
| The name and title of each person authorized to manage and control the Limited Liability Company: |
| and stated the state of the sta |
| KOBO K KOBSON |
| (AMBR) |
| |
| |
| · |
| |
| |
| |
| |
| · · · · · · · · · · · · · · · · · · · |
| |

H17000282636

Required Signatures:

Signature of a member or an authorized representati

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.

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 ray 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)

H170002826136