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## FLORIDA LIMITED LIABILITY CO. CABCULTI LLC

Certificate of Status	1
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The fiame of the Limited Liability Company is: Must end with the words Limited Liability Company,	•
CABCULTI LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  8100 SW 81 Drive	
Suite 279	
MIAMI Fl. 33143	
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.)  JAVIEN GOHEZ  8100 SW 81 Dr. # 279  Him S  MIAMI F1. 33143	
ARTICLE IV- The name and title of each person authorized to manage and control the Limited Liability Company:	D
_ JAVIER GOMEZ AMBR	
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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.

Javies Gomez

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)