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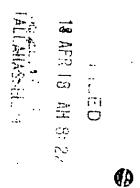
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# COVER LETTER

	ew Filing Section ivision of Corporations		
SUBJECT	EG ASSETT, LLC		
300011.0.1		.imited Liability Company	
The enclos	ed Articles of Organization and fee(s)	are submitted for filing.	
Please retu	rn all correspondence concerning this	matter to the following:	
	Katherine Castro		
		Name of Person	
	EG ASSETT, LLC		
	Firm/Company		
	PO BOX 226725		
	Address		
	MIAMI, FL 33222		
	agprum@hotmail.com	City/State and Zip Code	
-		ed for future annual report notification)	
For further in	aformation concerning this matter, plea	ase call;	
	Name of Person	305, 741 A 76 Area Code Daytime Telephone Number	
	. Sauce of Terson	Area Code Daytine Pelephone Number	
Enclosed is	a check for the following amount:		
<b>✓</b> \$125.00 Fi	fing Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee. Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address New Filing Section	Street Address New Filing Section	
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name**

The name of the Limited Liability Company is:

EG ASSET, LLC

#### **ARTICLE II - Address**

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

Principal Office Address:	<b>Mailing Address:</b>	
9363 Fontainebleau Blvd #207	PO BOX 226725	
Miami, FL 33172	Miami, FL 33222	

# ARTICLE III - Registered Agent, Registered Office, & Registered Agents' Signature

The name and the Florida street address of the registered agent are:

Alex Guerrero 9363 Fontainebleau Blvd #207 Miami, FL 33172

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 608. F.S..

Registered Agent's Signature

#### **ARTICLE IV – Managers or Managing Members**

Title: Name and Address:

PRES Alex Guerrero

PO BOX 226725 Miami, FL 33222

MGRM Katherine Castro

PO BOX 226725 Miami, FL 33222

#### **ARTICLE V - Percentage Participation of Members**

The Percentage participation of the members shall be as follows:

Alex Guerrero 75%

Katherine Castro 25%

# **ARTICLE VI – Membership Transfers Upon Death**

Upon the death of an individual Member (not a company or trust), the deceased Member's interest is to pass to (Please specify for each Member):

For Alex Guerrero, interest passes to Katherine Castro. In case the designated successor predeceases Alex Guerrero's interests shall pass to the heirs of the deceased member.

For Katherine Castro, interest passes to Alex Guerrero. In case the designated successor predeceases Alex Guerrero's interests shall pass to the heirs of the deceased member.

# ARTICLE VII - Management

The business of the company shall be conducted under the exclusive management of its managing members, who will have the exclusive authority to act for the company in all matters and shall have unlimited authority to act without consent of the owners/members.

REQUIRED SIGNATURES:

Alex Guerrero

Katherine Castro

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)