

Florida Department of State  
 Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
 CAMVAR HOLDING, LLC**

Certificate of Status	0
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**ARTICLES OF ORGANIZATION  
OF  
CAMVAR HOLDING, LLC**

**ARTICLE I:**

**NAME**

The name of the limited liability company is **CAMVAR Holding, LLC** (the "LLC").

**ARTICLE II:**

**ADDRESS**

The street address of the principal office of the LLC is **4013 W. Jetton Avenue, Tampa, Florida 33629**, and the mailing address of the LLC is **PO Box 320582, Tampa, Florida 33679**.

**ARTICLE III:**

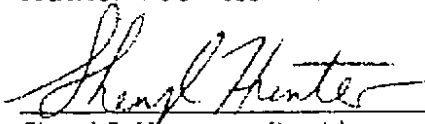
**REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the initial registered agent of the LLC are as follows:

**Hunter Business Law  
119 S. Dakota Avenue  
Tampa, FL 33606**

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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 of the Florida Statutes.

**Hunter Business Law**

  
\_\_\_\_\_  
*Sheryl S. Hunter, as President*

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**ARTICLE IV:  
EFFECTIVE DATE AND TIME**

The effective date and time of these Articles of Organization shall be the date and time that these Articles of Organization are filed with the Florida Department of State, Division of Corporations.

**ARTICLE V: PURPOSE**

The LLC is being formed for the purpose of transacting any and all lawful business for which a limited liability company may be organized under the Florida Revised Limited Liability Company Act.

**ARTICLE VI: DURATION**

The LLC is formed for an indefinite duration.


**ARTICLE VII: MANAGEMENT**

The LLC will be manager-managed.

**ARTICLE IX: MANAGERS**


The name and address of each person authorized to manage and control the LLC is as follows:

<u>Title:</u>	<u>Name and Address:</u>
<b>Manager</b>	<b>Miguel Camargo</b> <b>PO Box 320582</b> <b>Tampa, Florida 33679</b>
<b>Manager</b>	<b>Jannet Varon</b> <b>PO Box 320582</b> <b>Tampa, Florida 33679</b>

  
\_\_\_\_\_  
Miguel Camargo, as authorized member

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In accordance with Section 605.0203(1)(b) of the Florida Revised Limited Liability Company Act, 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 Florida Department of State constitutes a third-degree felony as provided for in Section 817.155 of the Florida Statutes.

  
\_\_\_\_\_  
Miguel Camargo

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