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.

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To:		.n	_
	Division of Corporations		C
	Fax Number : (850)617-6381	٠, ـ	
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From:		-	-
	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.		
	Account Number : I20000000019		ŗ
	Phone : (305)552-5973		C
	Fax Number : (305)675-5944		
*Enter ani	the email address for this business entity to be used for nual report mailings. Enter only one email address please.	future	2

## FLORIDA LIMITED LIABILITY CO. M.VALDES LLC

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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY $_{\geq_{\mathcal{F}}}$

ARTICLE I - Name: The name of the Limited Liability Company is:	T I SEP I
M. Valdes LLC	PP M
ARTICLE II - Address: The mailing address and street address of the principal office of the Lin Company is:	N
1900 North Boy Shope or Mami F.L	35132
ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (The Company cannot serve as its own Registered Agent. You must designate an individual or another busing with an active Florida registration.)  MICHEL Valde	ess entry
MICHEL Ugldes 1900 worth Bayshore Dr Mani Fil	<u> 35132</u>
ARTICLE IV The name and title of each person authorized to manage and control tiability Company: (MGR or AMBR)  MICHEL Valdey (Am  1900 North Baysyore Or Mi	BR)

## Required Signatures:

3052201440

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.

Michel U9 deg

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)