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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

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FLORIDA LIMITED LIABILITY CO. EMMAVA LLC

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

ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

	EMMAVA LLC
: > -	ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
<u> </u>	8400 NW 36 ST DORAL FLORIDA 3316
<u> </u>	16453 SW 97 ST MIAMI FLORIDA 33,196
,	ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (I is Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another susiness entity with an active Florida registration)
 .	1653 SW 97 ST MIAMI FLORIDA 33196
	EMILY ANTOINETTE MORA MIELES
	ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
AMB.	REMILY ANTOINETTE MORA MIELES
AMBI	SANDRA PATRICIA HORA MIELES PITA

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.

EMELY ANTOINETTE MORA MIELES

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