(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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JALLAHASŠEC FLORIDA

COVER LETTER

TO:	New Filing Section Division of Corporations	
SUBJE	AYKOS HOLDING LLC	:
		Name of Limited Liability Company
The enc	losed Articles of Organization a	and fee(s) are submitted for filing.
Please re	eturn all correspondence concer	ning this matter to the following:
	LAURA ARENAS	
		Name of Person
	AYKOS HOLDING LLC	
		Firm/Company
	10267 NW 31st ST	
		Address
	CORAL SPRINGS, FLOR	DA 33065
	INFO@JCBSOLUTIONSIN	City/State and Zip Code C.NET
		(to be used for future annual report notification)
For further	r information concerning this m	atter, please call:
	LAURA ARENAS VELEZ	866 296-1833
	Name of Person	Area Code Daytime Telephone Number
Enclosed	is a check for the following am	ount:
□ \$1 25.0	00 Filing Fee	
	Mailing Address	Street Address
	New Filing Section Division of Corporation	New Filing Section Division The Centre of Tallahassee
	P.O. Box 6327	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32314	Tallahassee, FL 32303

ARTICLE IV-

• • • • • •

The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	LAURA ARENAS VELEZ
	10267 NW 31st ST
	CORAL SPRINGS, FLORIDA 33065
MGR	GUILLERMO A. ARENAS RESTREPO
-	10267 NW 31st ST
	CORAL SPRINGS, FLORIDA 33065
AMBR	AYKOS SAS
	CARRERA 64 b # 49 B 13 SUITE 201
	MEDELLIN - COLÖMBIA
(Use attachment if necessary)	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liabi	ity Company is:			
AYKOS HOLDING				
(Must con	ntain the words "Limited	Liability Cor	npany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	address of the principal	office of the L	imited Liability Company is:	
<u>Princi</u>	pal Office Address:		Mailing Address:	
10267 NW 31st ST			10267 NW 31st ST	
CORAL SPRINGS	FLORIDA 33065	-	CORAL SPRINGS, FLORIDA 33065	<u> </u>
ARTICLE III - Registered As (The Limited Liability Compan another business entity with an The name and the Florida street	y cannot serve as its own active Florida registration	n Registered A on.) d agent are: <u>UTIONS INC</u> Name SUITE 237	gent. You must designate an individual o	507.10 10 2.10:
	City	State	Zip	-1
nace designated in this certificate further agree to comply with the p	. I hereby accept the app rovisions of all statutes ri bligations of my position	ointment as re elating to the j as registered d	for the above stated limited liability compagistered agent and agree to act in this cape proper and complete performance of my duagent as provided for in Chapter 605, F.S	acity, 1

(CONTINUED)