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To:

Division of Corporations

Fax Number

3052201440

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA LIMITED LIABILITY CO. B.Y.G ATTENDING LLC

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

122 JUN-6 PM 3: 30

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| A | |
|--|---|
| ARTICLE I - Name: | |
| The name of the Limited Liability Company is: | , |
| Liability Company is: | |
| BYG Attending LCC | |
| A DOWN ON THE | |
| | |
| The mailing address and street address of the principal office Company is: | |
| Company is: | of the Limited Time |
| • | - 1 are entitled Liability |
| 1860 N.W 41 51 | |
| Miami, f. 1 33142 | |
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| | 1022 |
| ARTICIEUR | |
| ARTICLE III - Registered Agent, Registered Office: | 表 · · · · · · · · · · · · · · · · · · · |
| The name and the Florida street address of the registered age Company cannot serve as its own Registered Agent. You must designate an individual or a with an active Florida majoration. | |
| Company cannot serve as its own Registered Agent. You must designed age | nt are: (The Limiter' Liability |
| Company cannot serve as its own Registered Agent. You must designate an individual or a with an active Florida registration.) | unother business entity |
| | |
| 1860 N.W 4151 | ٠ |
| | 9: 4 :3 |
| . 10: 1 0: | |
| Miami, F1 33142 | |
| | · |
| BELKYS YERO GUEYAR | 2A. |
| | |
| ARTICLE IV | |
| The name and title of each person authorized to | |
| The name and title of each person authorized to manage and c Liability Company: (MGR or AMBR) | control the Limi ed |
| | |
| BELKYS YERO GUEUA | |
| -DELKYS YERO GUELLA | PA LANGE |
| 406010 | C>> (LI INDE |
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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.

ELKYS YERO SUEVILLA

Typed or printed name of signce

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 here by 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 provide for in Chapter 605, F.S..

Registered Agend's Signature (REQUIRED)