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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : CORPOLICENSE, INC Account Number : I20050000118

: (305)774-9606 Phone : (305)774-9660 Fax Number

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

FLORIDA LIMITED LIABILITY CO. FANTASY COOLING, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF FANTASY COOLING, LLC

ARTICLE I - NAME:

The name of the Limited Liability Company Is:

FANTASY COOLING, LLC

ARTICLE II - ADDRESS:

The mailing and principal address of the Limited Liability Company is:

PRINCIPAL ADDRESS:

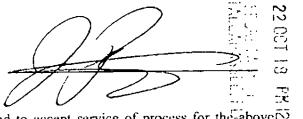
8850 SW 72nd Street, Apt G 343

Miami, FL 33173

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The Registered Agent designated is: JOSE MANUEL PEREZ

JOSE MANUEL PEREZ 8850 SW 72nd Street, Apt G 343 Miami, FL 33173



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.

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ARTICLE IV - Management/Member(s):

The name and address of each Manager or Managing Member is as follows:

TITLE:

NAME AND ADDRESS

MGR

JOSE MANUEL PEREZ

8850 SW 72nd Street, Apt G 343

Miami, FL 33173

ose Manuel Perez

Manager

(In accordance with section 605.0201, Florida Statutes, The execution of this document constitutes an affirmation under The penalties of perjury that the facts stated herein are true)

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