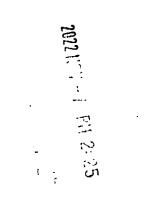
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COVER LETTER

	New Filing Sec Division of Cor					•
SURJEC	т. А	A 2	Enter	prise LLC		
300360	··		Name of Lim	ited Liability Company		
The enclo	osed Articles of	Organizatio	on and fee(s) are	submitted for filing.		
Please res	urn all correspo	ondence con	cerning this ma	tter to the following:		
		H	umber	to Av. la		
				Name of Person		
						
				Firm/Company		
		(Ĩ15 Λ	1 Franklin Address	5+	2212
	<u></u>		11.5	Address	·	
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		E-mail addr	ess: (to be used	for future annual report no	ntification)	
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Enclosed	l is a check for t	he follown	g amount:			
		□\$ 130.0	•	□\$155.00 Filing Fee Certified Copy (additional copy is encle	osed) Ceri	160.00 Filing Fee, tificate of Status & tified Copy tional copy is enclosed)
	Mailir	ig Address		Street Addres	s	
		iling Sectio	n	New Filing Sec		
		an of Com.		The Centre of	Tallabaccon	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	•
ASA Enterpriso	e LLC
(Must contain the words "Limited Liability Compan	y, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:

Principal Office Address:	Mailing Address:
915 N Franklin St 2212	915 N Franklinst 2212
Tampa FL 33602	Tampa FL 33602

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street ac	ddress of the regist $\mathcal{H} \cup \mathcal{m}$	ered be	agenture: rto Avila		
			Name Franklin		2212
		dress	(P.O. Box NOT accep	table)	602
	City	A		Zin	

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 of registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

<u>Title:</u>	
"AMBR" = Authorized Member	
"MGR" = Manager	11 shorts Arila
AMBR	Humber to Avila 915 N Franklin St 2212 Tampor FL 33602
	Tamon FL 33(602
AMBR	Your Alama Lappa
AIIIOR	915 N Franklin S+ 2212
	Yanet Aloma Lopez 915 N Franklin St 2212 Tampa FL 33602
	1 1
	
(Use attachment if necessary)	
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