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FLORIDA LIMITED LIABILITY CO.
PORTILLO SERVICES, LLC.

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

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

PORTILLO SERVICES, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

PORTILLO SERVICES, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**8887 FONTAINEBLEAU BLVD APT 104
MIAMI, FL 33172**

The mailing address shall be:

**8887 FONTAINEBLEAU BLVD APT 104
MIAMI, FL 33172**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

The name and the Florida street address of the registered agent are:

NORKIS N. PORTILLO REINA

8887 FONTAINEBLEAU BLVD APT 104
Florida Street address (P.O. BOX NOT acceptable)
MIAMI, FL 33172
City, State, and Zip

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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

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

NORKIS N. PORTILLO REINA
8887 FONTAINEBLEAU BLVD APT 104
MIAMI, FL 33172

AMBR


EDMUNDO, CRUZ
8887 FONTAINEBLEAU BLVD APT 104
MIAMI, FL 33172

MANAGER

CLERK OF STATE
TALLAHASSEE, FL

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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.)

NORKIS N. PORTILLO REINA
Typed or printed name of signer