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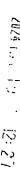
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited I	Liability Company is:				
Cealunfa L.L.C	2.				
	st contain the words "Limi	ted Liability Company, "I	L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and st	treet address of the princip	al office of the Limited L	iability Company is:		
Principal Office Address:			Mailing Address:		
9331 SW 4th S	St. # 210A	9331 5	SW 4th St. # 210A		
Miami, Florida		Miam	, Florida	Florida	
33174		<u>33174</u>			
another business entity wi	_	ered agent are: odriguez			
		Name			
	9331 SW 4th St.	# 210A	•		
			P.O. Box NOT acceptable)		
	Miami	Florida	33174		
	City	State	Zip		
Having been named as regis place designated in this cert further agree to comply with am familiar with and accept	ificate, I hereby accept the a the provisions of all statute the obligations of my posit	appointment as registered es relating to the proper d	l agent and agree to act nd complete performan provided for in Chaptei	in this capac ce of my dutie	ity. I
		,		_	ت د سا

ARTICLE IV-

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

_ _ _			<u>Title:</u>
			"AMBR" = Authorized Member
<u> </u>			"MGR" = Manager
_		Luz Marina Nino Ariza 9331 SW 4th St. #210A	AMBR
•		Miami, Florida, 33174	
		Alvaro Vargas Rodriguez	MGR
_		9331 SW 4th St. # 210A	
		Miami, Florida, 33174	
			
			
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			(Use attachment if necessary)
			(Osc attachment it necessary)
		nt of State's records.	he document's effective date on the Depart ARTICLE VI: Other provisions, if any.
			N/A
		(Horoboc	REQUIRED SIGNATURE:
_	ember.	member or an authorized representative of a membe	Signature o
3 .5	Florida Statutes:	cuted in accordance with section 605.0203 (1) (b), Flori	This document is
		lse information submitted in a document to the Departm	
te.		ree felony as provided for in s.817.155, F.S.	
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te.	-	Rodriguez Typed or printed name of signee	
1.		Rodriguez	<u>Alvaro Var</u>
1.	ent T	Rodriguez Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent	<u>Alvaro Var</u>
nc	this date will no	member or an authorized representative of a membe	If an effective date is listed, the date must he date of filing.) Note: If the date inserted in this block does the document's effective date on the Depart ARTICLE VI: Other provisions, if any. N/A REQUIRED SIGNATURE: