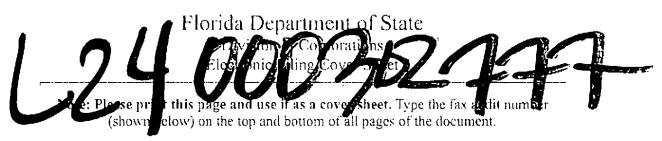
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Division of Comorations



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FLORIDA LIMITED LIABILITY CO. ALBERTO SILBER LLC

Certificate of Status	Ü
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Help

ARTICLE I - Name: The name of the Limited Lia	ability Company is:			
	. , , ,			
ALBERTO SILI	BER LLC			
(Must	contain the words "Limited	l Liability Company,	"L.L.C.," o: "LLC.")	
ARTICLE II - Address:				
The mailing address and stre	et address of the principal	office of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
4664 SW 127 TERRACE		4664	4664 SW 127 TERRACE	
	MIRAMAR, FL 33027		MIRAMAR, FL 33027	
MIRAMAR, FL ARTICLE III - Registered (The Limited Liability Comp	Agent, Registered Office	. & Registered Ages		
MIRAMAR, FL ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office cony cannot serve as its ow an active Florida registrati cet address of the registere	. & Registered Ages n Registered Agent. on.) d agent are:	at's Signature:	
MIRAMAR, FL ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office any cannot serve as its ow an active Florida registrati	. & Registered Ages n Registered Agent. on.) d agent are:	at's Signature:	
MIRAMAR, FL ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office cony cannot serve as its ow an active Florida registrati cet address of the registere	. & Registered Agent Registered Agent on.) d agent are: iER Name	at's Signature:	
MIRAMAR, FL ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office sony cannot serve as its ow an active Florida registrati cet address of the registere ALBERTO M. SILI	. & Registered Agent Registered Agent on.) d agent are: iER Name	nt's Signature: You must designate an individual or	
MIRAMAR, FL ARTICLE III - Registered	Agent, Registered Office sony cannot serve as its ow an active Florida registrati cet address of the registere ALBERTO M. SILI	. & Registered Agent Registered Agent on.) d agent are: iER Name	nt's Signature: You must designate an individual or	

 H_0 17 ph fu ul I an

Registered Agent's Signature (REQUIRED)

(CONTINUED)

A	D'I	l'Ta	<u>ر</u>	L.	IV.

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	ALBERTO M. SILBER 4664 SW 127 TERRACE MIRAMAR, FL 33027
AMBR	BERTA SILBER 4664 SW 127 TERRAÇE MIRAMAR, FL 33027
AMBR	JAVIER M. SILBER 4664 SW 127 TERRACE MIRAMAR, FL 33027
(Use attachment if necessary)	
(If an effective date is listed, the date mus the date of filing.)	the date of filing:
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	April
	a to place to the control of the con

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statmes. 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.

ALBERTO M. SILBER

Typed or printed name of signee