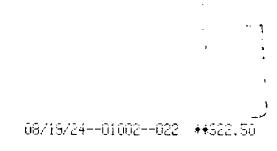
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## COVER LETTER

Division of Corporations
SUBJECT: Carlos A. Velez PLLC  Name of Limited Liability Company
The enclosed Articles of Organia
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Larlos A. Velez
Name of Person
Lartos A. Velez DIIO
Firm/Company
275 NF 12th ST
Uni+1208
Address Address
- Mam, FL 33137
CCC C City/State and 2:- C
E-mail address (not
E-mail address: (to be used for future annual report notification)  For further information concerning this part.
For further information concerning this matter, please call:
Carlos A. Velez 786 200
Name of Person
Area Code Daytime Telephone Number
the tosed is a check for the following amount.
US125.00 Filing Fee (\$\s\\$\)130.00 Filing Fee

Mailing Address

TO:

New Filing Section

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

Certificate of Status

Street Address

□\$155.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

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

□\$160.00 Filing Fce,

Certificate of Status &

(additional copy is enclosed)

Certified Copy

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

The name of the Limited Liability Company is:
Cados A Velez PLL
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address:  Mailing Address:
275 NE 18th STUNITION SAME
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 address of the registered agent are:  Carlo 5 A. Velez
Name  275 NE18 STUN; + 1208  Florida street address (P.O. Box NOT acceptable)  M', cmi  City State Zip
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. It further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and 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 (REQUIRED)
(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:
AGR" - Manager	Carlos A. Velez 275 NETS+ Uni+1208
V: Effective date, if other than the ditive date is listed, the date must be filing.)	late of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
V: Effective date, if other than the detive date is listed, the date must be filing.) he date inserted in this block does not ent's effective date on the Department.	specific and cannot be more than five business days prior to or 90 or meet the applicable statutory filing requirements, this date will not ent of State's records.
V: Effective date, if other than the detive date is listed, the date must be filing.) the date inserted in this block does not ent's effective date on the Department's effective date.	specific and cannot be more than five business days prior to or 90 or meet the applicable statutory filing requirements, this date will not
V: Effective date, if other than the detive date is listed, the date must be filing.)  the date inserted in this block does not ent's effective date on the Department's effective date on the Department's effective date.  VI: Other provisions, if any.  Signature of a This document is execution aware that any file.	member or an authorized representative of a member.  cented in accordance with section 605.0203 (1) (b), Florida Statutes. also information submitted in a document to the Department of State gree felony as provided for in s, 817.155, F.S.
Filing.)  he date inserted in this block does not be date inserted in this block does not be determined. VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a This document is exectly an aware that any file constitutes a third degree.	member or anjauthorized representative of a member.  Total discordance with section 605.0203 (1) (b), Florida Statutes.  Talk also information submitted in a document to the Department of State gree felony as provided for in \$,817.155, F.S.

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ARTICLE IV-