

**L0/0000/46/6**

Florida Department of State  
Division of Corporations  
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Katherine Harris, Secretary of State

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To: Division of Corporations  
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From: Account Name : RASCO, REININGER & PEREZ, P.A.  
Account Number : 104075000124  
Phone : (305) 476-7100  
Fax Number : (305) 476-7102

AL

**LIMITED LIABILITY COMPANY**

**A/R INFORMATION NETWORK, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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

**ARTICLE I. Name**

The name of the Limited Liability Company is:

**A/R INFORMATION NETWORK, LLC**

**ARTICLE II. -- Address**

The mailing address and street address of the principal office of the Limited Liability Company is:

**9757 N.W. 48<sup>TH</sup> Terrace  
Miami, Florida 33178**

**ARTICLE III. -- Registered Agent, Registered Office,  
& Registered Agent's Signature:**

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

**Miami Corporate Systems, Inc.  
283 Catalonia Avenue, 2<sup>nd</sup> Floor  
Coral Gables, Florida 33134**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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Audit No. H01000093843 0  
This instrument was prepared by:  
Salomon B. Esquenazi, Esq.  
Rasco, Reininger & Perez, P.A.  
283 Catalonia Avenue, 2<sup>nd</sup> Floor  
Coral Gables, Florida 33134  
(305) 476-7100  
Bar No. 992038

Audit No. H01000093843 0

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 608, F.S.

REGISTERED AGENT:

MIAMI CORPORATE SYSTEMS, INC.

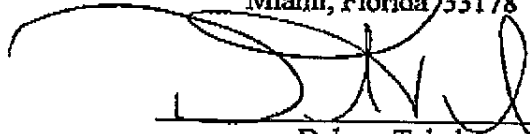
By:

  
Salomon B. Esquenazi  
Assistant Vice President

**ARTICLE IV. -- Management:**

X The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company. The name and address of such initial manager who is to serve as managers is:

Debora Tobal  
9757 N.W. 48 Terrace  
Miami, Florida 33178

  
Debora Tobal

Signature of a member or authorized representative of a member.  
In accordance with section 608.408(3), Florida Statutes,  
the execution of this document constitutes an  
affirmation under the penalties of perjury that the  
facts stated herein are true.

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