Division of Corporations

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To:

Division of Corporations

Fax Number : (8

: (850)205-0383

From:

Account Name : EMPIRE CORPORATE XIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696 O3 MAY 29 AMIL: O1

LIMITED LIABILITY COMPANY

11344 MEDITERRANEAN, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

11344 MEDITERRANEAN, LLC

ARTICLE II - Address:

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

11344 N.W. 70 Street Miami, Florida 33178

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

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

Manuel M. Arvesu

Name

201 Alhambra Circle, Suite 502

Florida street address(P.O. Box NOT acceptable)

Coral Gables, Florida 33034

City, State, and 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. 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.

ARTICLE IV - Management (Check box if applicable.)

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

Registered Agent's Signatur

Signature of a member or an authorized representative of a member.

(In accordance with section 508.408(3), Florida Statutes, the execution of this affidavit constitutes and affirmation under the penaltics of perjury that the facts stated herein are true.)

yped or printed name of signee

NHK-58-5003 T0:21

Cataldo Baglio