

L14 0000 77984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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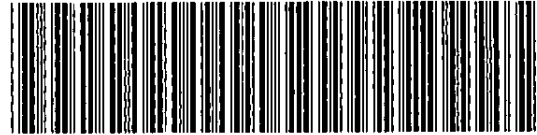
(Business Entity Name)

(Document Number)

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2014 MAY 13 PM 4:34  
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2014 MAY 13 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 14 2014

T CLINE

CORP DIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-23

CONTACT: SAVANNAH DEBOER

DATE: 05/13/14

REF. #: 7745692.9144631

CORP. NAME: 2D REAL ESTATE INVESTMENTS, LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# 70020231 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

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| <input type="checkbox"/> CERTIFICATE OF STATUS |   |  |

Examiner's Initials

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**ARTICLES OF ORGANIZATION**  
**OF**  
**2D REAL ESTATE INVESTMENTS, LLC**

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The undersigned Member or Authorized Representative of a Member signs these Articles of Organization and forms a limited liability company (the "*Company*") under the Florida Limited Liability Company Act (the "*Act*"), as follows:

**NAME**

The name of the Company is **2D Real Estate Investments, LLC.**

**MAILING ADDRESS AND STREET ADDRESS**

The mailing address and street address of the principal office of the Company is:  
200 S. Biscayne Blvd., Ste 2500  
Miami, Florida 33131

**NAME AND ADDRESS OF MANAGER**

The name and address of the Manager of the Company is:  
RS Financial Investments Ltd.  
Marcy Building, 2nd Floor  
Purcell Estate  
PO Box 2416  
Road Town, Tortola  
British Virgin Islands

**EXISTENCE**

The Company's existence will commence upon filing.

**INITIAL REGISTERED OFFICE AND AGENT**

The name and street address of the initial registered agent and office:  
**NRAI Services, Inc.,**  
1200 South Pine Island Road  
Plantation, FL 33324

In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

  
Michael A. Silva

Authorized Representative of Member

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ACCEPTANCE BY REGISTERED AGENT**

I accept the appointment as Registered Agent of the Company to accept service of process on its behalf at the place designated in these Articles of Organization. I am familiar with, and accept, the obligations of my position as registered agent as provided for in the Act.

Katie Wonsch Asst. Secretary  
NRAI Services, Inc.  
1200 South Pine Island Road  
Plantation, FL 33324

Dated: May 13, 2014

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