#L06000087006

STATEMENT OF FACT RE: CINNAMON PRIME, LLC

I, Gustavo Trujillo, have been incorrectly listed as a Manager in the Corporate Annual Report for the following limited liability company:

Cinnamon Prime, LLC. 1548 Brickell Ave. 2nd Floor Miami, Florida 33129

400310972524

FEI Number: 77-0719475

(Attached as Exhibit "A" is a copy of the subject annual report.)

I hereby certify that I have never been an employee, officer, manager, director, or held any position whatsoever in Cinnamon Prime, LLC. I have no affiliation, business or otherwise, with this company. I have filed this Statement of Fact which I understand will be made a public record on the Florida Division of Corporations for notice purposes.

Before me, an officer authorized to administer oaths personally appeared GUSTAVO TRUJILLO, who after being placed under oath stated that he has read the above and it is true and correct. He further presented ARGENUA DL as identification or is well known to me.

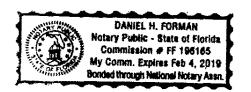
Sworn to and subscribed before me this

Notary Public, Name F

Notary Public, Signature

MIAMI, FL - 33131

My commission expires:



2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000087006

Entity Name: CINNAMON PRIME, LLC

Current Principal Place of Business:

1548 BRICKELL AVE. 2ND. FLOOR MIAMI, FL 33129

Current Mailing Address:

1548 BRICKELL AVE. 2ND. FLOOR MIAMI, FL 33129 US

FEI Number: 77-0719475

Certificate of Status Desired: No

FILED Feb 13, 2017

Secretary of State

CC2731376650

Name and Address of Current Registered Agent:

FLORIDA LAW TITLE & TRUST PLC 1548 BRICKELL AVE. FIRST FLOOR MIAMI, FL 33129 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

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SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title

MGR

Name

NORTH POINTE HOLDINGS (BVI) LTD.

Address

1548 BRICKELL AVE.

2ND, FLOOR

City-State-Zip: MIAMI FL 33129

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under cett; that I am a managing member or manager of the limited liability company or the receiver or frustee empowered to execute this report as required by Chapter 605, Floride Statutes; and that my name appears above, or or an attachment with all other like ampowered.

SIGNATURE: GUSTAVO TRUJILLO

MGRM

02/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date