

Division of Corporations

Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4003

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305)541-3694

Phone Fax Number

: (305)541-3770

LIMITED LIABILITY COMPANY

SIGNATURE BLUE SEAS, LLC

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ARTICLES OF ORGANIZATION

FOR

SIGNATURE BLUE SEAS, LLC

ARTICLE L - NAME:

The name of this Limited Liability Company ("Company") shall be:

SIGNATURE BLUE SEAS, LLC

ARTICLE II. - ADDRESS

The mailing address and street address of the principal office of the Company is:
c/o Mr. Jose Cabanas
782 N.W. LeJeune Road
Suite 637
Miami, Florida 33126

ARTICLE III - DURATION

The period of duration for the Company shall be perpetual unless dissolved according law.

ARTICLE IV . MANAGEMENT

The Company is to be managed by: a manager or managers and the name(s) and address of such manager is:

Mr. Xavicr Hawley 20 Venetian Way Miami Beach, Florida 33139

ARTICLE V. - ADMISSION OF ADDITIONAL MEMBERS

The right of the members to admit additional members and the terms and conditions of the admissions shall be: new members may be admitted from time to time and upon such terms and conditions as shall be determined by a unanimous vote of the holders of all of the Membership Interests.

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ARTICLE VI. - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right of the members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continual membership of a member in the Company shall be: determined by a unanimous vote of the remaining holders of all of the Membership Interests to continue to conduct the business of the Company under the Company's name.

Signature of a member or an authorized representative of a member PEDRO A. MARTIN

(In accordance with section 608,408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

PEDRO A. MARTIN
AUTHORIZED REPRESENTATIVE

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- The name of the limited liability company is: SIGNATURE BLUE SEAS, LLC
- The name and the Florida street address of the registered agent are:

PEDRO A MARTIN. ESO.

Greenberg Traurig, P.A.

1221 Brickell Avenue. Suite 2100

Florida street address (F.O. BOX NOT ACCEPTABLE)

Mismi, Florida 33131 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 agest 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.

SIGNATURE PEDRO A. MARTIN

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