

Division of Corporations

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## Florida Department of State

Division of Corporations

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Account Name : RUDEN, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.  
Account Number : 076077000521  
Phone : (954) 527-2428  
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## LIMITED LIABILITY COMPANY

Latalasso, LLC

Certificate of Status	0
Certified Copy	1
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FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

January 17, 2001

RUDEN, MCCLOSKY, SMITH, SCHUSTER &amp; RUSSELL, P.A.

SUBJECT: LATALASSO, LLC  
REF: W01000001290

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**ARTICLES OF ORGANIZATION  
OF  
LATALASSO, LLC.  
a Florida Limited Liability Company**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME. The name of the Limited Liability Company is **LATALASSO, LLC** (the "Company").

2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 400 14<sup>th</sup> Street, Miami Beach, FL 33139.

3. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Certification of Designation of Registered Agent/Registered Office accompanies these Articles of Organization is: P. Tristan Bourgoignie, Esq. 701 Brickell Ave., #1900, Miami, FL 33131.

4. MANAGEMENT. The business of the limited liability company shall be managed by one or more members and is, therefore, a member-managed company.

The undersigned has executed these Articles of Organization on the 17th day of January, 2001.



By: \_\_\_\_\_

P. Tristan Bourgoignie, Esq.  
Authorized signatory of the Members

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**CERTIFICATION OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: LATALASSO, LLC.
2. The name and address of the registered agent and office is:

P. Tristan Bourgoignie, Esq.  
701 Brickell Ave., #1900  
Miami, FL 33131

*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 its 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.*



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P. Tristan Bourgoignie, Esq.01/17/2001

Date

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