

L0100000/5374

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

luna/mare, llc

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LUNA/MARÉ, LLC

ARTICLE II - Address:

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

520 Brickell Key Drive
Suite O-305
Miami, Florida 33131

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual.

ARTICLE IV - Management

(check and complete the appropriate statement)

- X The Limited Liability Company is to be managed by
manager or managers and the names and addresses of such
managers are:

Stephanie Pelle
Paul Woodburn
520 Brickell Key Drive
Suite O-305
Miami, Florida 33131

The Limited Liability Company is to be managed by the
members and the names and addresses of the managing
members are:

Prepared by:

STEPHEN A. FREEMAN
Fla. Bar No. 2517692
Freeman Butterman, Maher & Rojas
520 Brickell Key Drive, O-305
Miami, Florida 33131

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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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:
LUNA/MARÉ, LLC

2. The name and address of the registered agent and office is:

Stephen A. Freeman
520 Brickell Key Drive
Suite O-305
Miami, Florida 33131

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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.



(SIGNATURE)

9/7/2001
(DATE)

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