

# L02000006113

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

terra 2001 meridian, llc

Certificate of Status	0
Certified Copy	1
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DIVISION OF CORPORATION

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ARTICLES OF ORGANIZATION

FOR

TERRA 2001 MERIDIAN, LLC

ARTICLE I. - NAME:

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

TERRA 2001 MERIDIAN, LLC

ARTICLE II. - ADDRESS


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

c/o Pedro A. Martin, 1221 Brickell Avenue, Suite 2100, Miami, Florida 33131.

ARTICLE III. - MANAGEMENT

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

Pedro A. Martin  
1221 Brickell Avenue, Suite 2100  
Miami, Florida 33131

  
\_\_\_\_\_  
Signature of authorized representative of a member

(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.)

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TALLAHASSEE, FLORIDA  
02 MAR 14

**H 02000056800****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.

1. The name of the limited liability company is: TERRA 2001 MERIDIAN, LLC
2. The name and the Florida street address of the registered agent are:

PEDRO A. MARTIN  
NAME

1221 Brickell Avenue, Suite 2100  
Miami, Florida 33131  
Florida street address (P.O. BOX NOT ACCEPTABLE)

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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

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