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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : STEEL HECTOR & DAVIS
Account Number : 071541002004
Phone : (305)577-4726
Fax Number : (305)577-7001

LIMITED LIABILITY COMPANY

NINO LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

DIVISION OF CORPORATIONS

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**ARTICLES OF ORGANIZATION OF
NINO LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is: NINO LLC

ARTICLE II - Address:

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

200 South Biscayne Boulevard
Suite 4100
Miami, FL 33131

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

PO00000026282
Corporate International Registered Agents, Inc.
Name
200 South Biscayne Boulevard, Suite 4100
Florida street address (P.O. Box NOT acceptable)
Miami, FL 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 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 as provide for in Chapter 608, F.S.

Guillermo J. Fernandez-Quincoces
Registered Agent's Signature

ARTICLE IV - Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Guillermo J. Fernandez-Quincoces
Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Guillermo J. Fernandez-Quincoces

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FL 32304

APPROVED
AND
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