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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 : EMFIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694 Fax Number: (305)633-9696

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02 JUN 11 AM 10: 31

17/15:00 OF CORPORATION

LIMITED LIABILITY COMPANY

IOXUS REALITY, L.L.C.

Name Availabilit y	
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The name of the Limited Liability Company is:

IOXUS REALTY, L.L.C.

ARTICLE II – Address:

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

2655 Le Jeune Road 3rd Floor Coral Gables, FL 33134

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

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

ORLANDO V. MONTIEL

Name

2655 Le Jeune Road, 3td Floor

Florida street address

Coral Gables, FL 33134

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 The

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.

(An additional article must be added if an effective date is requested

Significant of a member of an authorized representative of a member

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

ORLANDO V. MONTIEL

Typod or printed name of signee

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