Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: I20010000247 Phone : (305)674-3313 Fax Number : (305)674-3359

LIMITED LIABILITY COMPANY

Bis LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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articles of organization for a florida

LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

Bis LLC

ARTICLE II: Address

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

7329 Monaco Street Corel Gables, Florida 33143

ARTICLE III: REGISTERED AGENT. REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

Maria del Pilar Antorcha

7329 Monaço Street

Coral Gables, Florida 33143

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I haveby 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 provided for in Chapter 608, F.S.

Marie dei Pilar Antorche / Registered Agent's Signature

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by members and is, therefore, Member Managed Company.

ARTICLE V: MEMBERS (optional)

MEMBER: Gustavo R. Antorcha 7329 Monaco Street Coral Gables, Florida 33143

MEMBER: Maria del Pilar Antorcha 7329 Monaco Street Coral Gables, Florida 33143

MEMBER: Gustavo E. Antorcha 881 Ocean Drive - 9E Key Biscayne, Florida 33149 Country3: USA

MEMBER: Adriana R. Antorcha 881 Ocean Drive - 9E Key Biscayne, Florida 33149

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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.)

Gustavo R. Antorcha

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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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

FALCON YOUNG PINES COMMERCIAL, LLC

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

Gary N. Gerson 1645 Palm Beach Lakes Blvd. Suite 1200 West Palm Beach, Florida 33401 THE WOOD OF THE PARTY OF THE PA

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Gary N. Gerson, Registered Agent

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