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Florida Department of State  
Division of Corporations  
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TALLAHASSEE, FLORIDA

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

From: Account Name : BERRIZ & GIRALDO P.A.  
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY  
COMODORO, LLC.

Certificate of Status	1
Certified Copy	0
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JB  
7-16-03

HO3 000 2345244

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
OF**

**COMODORO, LLC.**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**COMODORO, LLC.**

**ARTICLE II - ADDRESS**

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

**600 BRICKELL AVE SUITE # 300Z  
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:

**FERNANDO DAMIAN MAZZONI**

Name

**600 BRICKELL AVE SUITE 300Z**  
Florida street address ( P.O.BOX NOT acceptable)

**MIAMI, FL 33131**  
City, State, and Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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YOHIMA DEL CORRAL  
4080 SW 84 AV  
MIAMI, FL 33155  
305-4859300

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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 as provided for in Chapter 608, F.S..



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.

MARIA CRISTINA FAJARDO  
600 BRICKELL AVE SUITE # 300Z  
MIAMI, FL. 33131

MANAGER

MARIA LUCIA MORALES  
600 BRICKELL AVE SUITE # 300Z  
MIAMI, FL. 33131

MANAGER

JUAN EDUARDO MORALES  
600 BRICKELL AVE SUITE # 300Z  
MIAMI, FL. 33131

MANAGER

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APPROVED  
AND  
FILED

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



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.)

**FERNANDO DAMIAN MAZZONI**

Typed or printed name of signee

H03 000 234 5244