# 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

tag 600 management, Ilc

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A ...

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

P.61/83

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(3)

#### ARTICLES OF ORGANIZATION

#### FOR

TAG 600 MANAGEMENT, LLC

#### ARTICLE L - NAME:

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

TAG 600 MANAGEMENT, LLC

#### ARTICLE II. - ADDRESS

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

1200 Brickell Avenue, Suite 1840, 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
1200 Brickell Avenue, Suige 1840
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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#### 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: TAG 600 MANAGEMENT, LLC
- 2. The name and the Florida street address of the registered agent are:

Pedro A. Martin NAME

1200 Brickell Avenue, Suite 1840, Miami, Florida 33131 Florida street address (P.O. BOX NOT ACCEPTABLE)

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 at 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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