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Florida Department of State  
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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  
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TALLAHASSEE, FLORIDA

**LIMITED LIABILITY COMPANY**

**vivace, llc**

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10/20/04

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

VIVACE, LLC

## ARTICLE II - Address:

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

18106 Collins Avenue  
Sunny Isles Beach, FL 33160

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

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

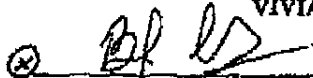
MARK E. ROUSSO, ESQ.  
Name  
18851 N.E. 29 Avenue, Suite 900  
Aventura, FL 33180  
City, State, and Zip

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 provided for in Chapter 608, F.S.

  
Registered Agent's Signature

## ARTICLE IV - Management (Check box if applicable)

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

The Managers are:CARMEN DIANA SZWARC  
HENITO ALBERTO LABOVSKY  
CINTHIA Yael LABOVSKY  
VANESA ANDREA LABOVSKY  
VIVIAN LABOVSKY

Benito Alberto Labovsky

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.)

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