

L040000082421

Florida Department of State

FILED

Division of Corporations

Public Access System

2004 NOV 12 AM 11:08

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H04000226028 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

04 NOV 12 AM 8:31

Division of Corporations

LIMITED LIABILITY COMPANY

lemamoto, l.l.c.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

H04000226028

ARTICLES OF ORGANIZATION

OF

LEMAMOTO, L.L.C.
A Limited Liability Company

FILED

2011 Nov 12 A 11:08

CLERK OF THE STATE
TALLAHASSEE, FLORIDA

4

ARTICLE I - NAME

The name of the limited liability company ("Company") is: LEMAMOTO, L.L.C.

ARTICLE II - ADDRESS

The mailing and street address of the Company's principal office is: 18901 N.E. 29th Avenue, Suite 100, Aventura, Florida, 33180.

ARTICLE III - DURATION

The Limited Liability Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The Company's existence shall be perpetual unless the Company is earlier dissolved as provided in these Articles of Organization.

ARTICLE IV - PURPOSE

This Limited Liability Company is organized for the purpose of transacting any or all lawful business for which a limited liability company may be organized pursuant to Chapter 608, Florida Statutes, as amended from time to time.

ARTICLE V - MANAGEMENT

The Limited Liability Company is to be managed by a manager or managers and the name and address of such manager, to serve until a successor or successors are elected and qualified is: Guillermo Freile whose address is 18851 N.E. 29th Avenue, Suite 106, Aventura, Florida, 33180.

ARTICLE VI - ADMISSION OF ADDITIONAL MEMBERS

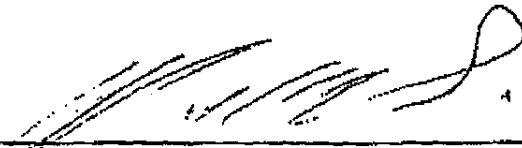
Members of the Company have the right to admit new members. Additional members may be admitted only on the unanimous written consent of the existing members, and the existing members shall determine the amount and nature of contributions by new members at the time the new members are admitted.

ARTICLE VII - MEMBERS RIGHTS TO CONTINUE BUSINESS

H04000226028

The remaining members of the Company shall have the right to continue the business of the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member in accordance with the Operating Agreement.

FILED
2004 NOV 12 A 11:08
CLERK OF DISTRICT COURT
STATE OF FLORIDA



Signature of a member or an 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.)

Guillermo Freile

Typed or printed name of signer

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED

NOV 12 A 11:09


PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED 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: LEMAMOTO, L.L.C.,
2. The name and the Florida street address of the registered agent is:

DADE COUNTY CORPORATE AGENTS, INC.
Suite 100
18901 N.E. 29th Avenue
Aventura, Florida 33180

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.

DADE COUNTY CORPORATE AGENTS, INC.

By:  Signature

82072000276028