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

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY**ITALGLASS, LLC**

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED

LIABILITY COMPANY

OF

ITALGLASS, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

ITALGLASS, LLC

ARTICLE II - ADDRESS

THE MAILING ADDRESS AND STREET ADDRESS OF THE PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

3650 AVOCADO AVENUE
MIAMI, FL 33133

ARTICLE III - DURATION

THE PERIOD OF DURATION FOR THE LIMITED LIABILITY COMPANY SHALL BE:

This company shall exist perpetually.

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ARTICLE IV - MANAGEMENT

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TALLAHASSEE, FLORIDA

THE LIMITED LIABILITY COMPANY IS TO BE MANAGED BY THE MEMBERS AND
THE NAME AND ADDRESS OF THE MANAGING MEMBERS ARE:

Andres Aisner - Manager Member
3650 Avocado Avenue
Miami, FL 33133

Vladimiro Sosnowski - Manager Member
3650 Avocado Avenue
Miami, FL 33133

Carlos A. Orco - Manager Member
3650 Avocado Avenue
Miami, FL 33133

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

THE RIGHT, IF GIVEN, OF THE REMAINING MEMBERS TO ADMIT ADDITIONAL
MEMBERS AND THE TERMS AND CONDITIONS OF THE ADMISSIONS SHALL BE:

To the discretion and approval by all members.

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS

UPON THE DEATH, RETIREMENT, RESIGNATION, EXPULSION, BANKRUPTCY, OR
DISSOLUTION OF A MEMBER, OR THE OCCURRENCE OF ANY OTHER EVENT
WHICH TERMINATES THE CONTINUED MEMBERSHIP OF A MEMBER IN THE
LIMITED LIABILITY COMPANY, THE REMAINING MEMBERS, BY UNANIMOUS
APPROVAL, MAY ELECT TO CONTINUE THE BUSINESS OF THE LIMITED LIABILITY
COMPANY.

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

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PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.50, FLORIDA STATUTES, A 11:39
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT IN DESIGNATION THE REGISTERED OFFICE/REGISTERED AGENT, CLERK OF STATE
THE STATE OF FLORIDA. TALLAHASSEE, FLORIDA

1. The name of the limited liability company is: Italglass, LLC
2. The name and address of the registered agent and office is:

Andres Aisner
3650 Avocado Avenue
Miami, FL 33133

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.


Andres Aisner, Registered Agent-Manager Member