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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

**LIMITED LIABILITY COMPANY
PRIME GROUP DEVELOPERS USA TWO LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 14, 2005

FAS-T CORP. AGENTS, INC.

SUBJECT: PRIME GROUP DEVELOPERS USA TWO LLC
REF: W05000018821

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

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Jason Merrick
Document Specialist

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DIVISION OF CORPORATION

STATE OF FLORIDA
TALLAHASSEE, FLORIDA
05 APR 14 AM 10:06

FILED

Electronic Articles of Organization For Florida Limited Liability Company

Article I

The Name of the Limited Liability Company is:

PRIME GROUP DEVELOPERS USA TWO LLC

Article II

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

16375 NE 18TH AVE., SUITE 304
N.MIAMI BEACH FL 33162

The mailing address of the Limited Liability Company is:

16375 NE 18TH AVE., SUITE 304
N.MIAMI BEACH FL 33162

Article III

The Purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFULL BUSINESS WITHIN THE UNITED STATE OF AMERICA.

Article IV

The Name and Florida street address of the registered agent is:

JOSE MARTIN SAJDIE
16375 NE 18TH AVE SUITE 304
N.MIAMI BEACH FL 33162

SEP 14 10 10 AM '07
TALLAHASSEE, FLORIDA

05 APR 14 AM 10:07

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 a registered agent.

Registered Agent Signature:



Article V

The name and address of managing members/managers are:

Title: MGRM

JOSE MARTIN SAFDIE, MANAG MEMBER
16375 NE 18TH AVE SUITE 304
N. MIAMI BEACH FL 33162

DOLIA GONZALEZ, MEMBER
16375 NE 18TH AVE SUITE 304
N. MIAMI BEACH FL 33162

DAVID DICI, MEMBER
16375 NE 18TH AVE SUITE 304
N. MIAMI BEACH FL 33162

Article VI

The effective date for this Limited Liability Company shall be:

04/19/05

Signature of member or an authorized representative of a member

Signature:

JOSE MARTIN SAFDIE, MGRM
16375 NE 18TH AVE SUITE 304
N. MIAMI BEACH FL 33162

DAVID DICI, MEMBER
16375 NE 18TH AVE SUITE 304
N. MIAMI BEACH FL 33162

DOLIA GONZALEZ, MEMBER
16375 NE 18TH AVE SUITE 304
N. MIAMI BEACH FL 33162

[Handwritten signature]
David Dichi

[Handwritten signature]

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