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DIVISION OF CORPORATION

To:

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Account Name : EMPIRE CORPORATE KIT COMPANY
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

floridaprop, llc

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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY OF**

FLORIDAPROP, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I

The name of the Limited Liability Company shall: FLORIDAPROP, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company is: 4801 NW 99th COURT, MIAMI, FL 33178

ARTICLE IV

The name and address of the Managing Member(s) for this Company shall be:

FERNANDO MAURIN

4801 NW 99th COURT
MIAMI, FL 33178

GABRIEL KEYMER

201 CRANDON BLVD., #502
KEY BISCAYNE, FL 33149

ARTICLE V

The name and the Florida street address of the registered agent: CABANAS & ASSOCIATES, P.A., 10520 N.W. 26TH STREET, C-201, DORAL, FL 33172

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE

FLORIDAPROP, LLC

(Name of Company)

Having been named as Registered Agent and to accept service of process for the above stated Limited Liability Company at the place designated in the Articles of Organization, 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.

CABANAS & ASSOCIATES, P.A.

Registered Agent

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.)

JOSEPH F. CABANAS

Typed or Printed Name of Signee

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TALLAHASSEE, FLORIDA

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