Florida Department of State

Division of Corporations Public Access System

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : BERRIZ & GIRALDO P.A.

Account Number : I19990000017 : (305)485-9300 : (305)485-1098

Fax Number

LIMITED LIABILITY COMPANY

ICON 3408 LLC.

Certificate of Status	1
Certified Copy	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITION AND A 9: 23

OF

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ICON 3408 LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

ICON 3408 LLC.

ARTICLE II - ADDRESS

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

2476 BRICKELL AV # 2603 MIAMI, FL 33129

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

VANESSA MAWAD

2475 BRICKELL AV # 2603

Florida street address (P.O.BOX NOT acceptable)

MIAMI, FL 33129

City, State, and Zip

BERRIZ & GIRALDO P.A. 4080 SW 84 AVE SUITE C MIAMI, FL 33155 (305) 485-9300 HOS0001358773

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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, 10: 23 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 STATE the proper and complete performance of my duties, and I am familiar with error FLORIDA accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

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

ANTONIO MAWAD 2475 BRICKELL AV # 2603 MIAMI, FL 33129 MANAGER

MIGUEL MAWAD 2475 BRICKELL AV # 2603 MIAMI, FL 33129

MANAGER

VANESSA MAWAD 2475 BRICKELL AV # 2603 MIAMI, FL 33129 MANAGER

(An additional article must be added if an effective date is requested)

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.)

VANESSA MAWAD

Typed or printed name of signee

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