Division of Corporations

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Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694

Phone : (305)634-3694 Fax Number : (305)633-9696

## LIMITED LIABILITY COMPANY

## the river 2402 llc

| Certificate of Status | 0        |
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P.01/04

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P.02/04

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

THE RIVER 2402 LLC



#### ARTICLE I

The name of the Limited Liability Company shall: THE RIVER 2402 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: 5132 NW 116<sup>TH</sup> COURT, MIAMI, FL 33178.

### ARTICLE IV

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

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#### ARTICLE V

The name and address of the Managing Member(s) of this company:

Managing Member

GABOR KOVACS SCHUMANN

5132 NW 116<sup>TH</sup> COURT

MIAMI, FL 33178

Managing Member

SUZANNE KOVACS

5132 NW 116<sup>TH</sup> COURT

MIAMI, FL 33178

Mananging Member

LUIS RAMON ROMERO SERRATE

5132 NW 116TH COURT

MIAMI, FL 33178

Managing Member

ANNA JULIA SUAREZ GARCIA

5132 NW 116<sup>TH</sup> COURT

MIAMI, FL 33178

Managing Member

JAIME JESUS ZAMBRANO HUNG

5132 NW 116TH COURT

MIAMI, FL 33178

Managing Member

LAS JJ LLC

5132 NW 116TH COURT

MIAMI, FL 33178

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

THE RIVER 2402 LLC

(Name of Company)

Having been name 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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