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**LIMITED LIABILITY COMPANY**

**eleni 02, llc**

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ELENI 02, LLC**

**ARTICLE I**

The name of the Limited Liability Company shall: ELENI 02, 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: 10556 NW 26th STREET, D-101, DORAL, FL 33172

**ARTICLE IV**

The name of the Managing Member(s) for this company shall be:

**Managing Member**

ELENA CORTESI DE SCATTOLINI

10556 NW 26th STREET  
D-101  
DORAL, FL 33172

**Managing Member**

DANIA SCATTOLINI CORTESI

10556 NW 26th STREET  
D-101  
DORAL, FL 33172

**ARTICLE V**

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

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

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SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

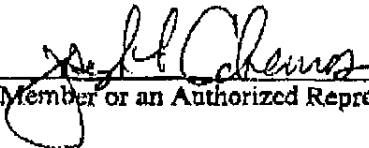
ELENI 02, LLC

(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 &amp; 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

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 Typed or Printed Name of Signee

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