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Division of Corporations : (850)205-0383 Fax Number

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Phone Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

terranorte investments, llc

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

TERRANORTE INVESTMENTS, LLC

ARTICLEI

The name of the Limited Liability Company shall: TERRANORTE INVESTMENTS, 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: 9737 NW 41ST STREET, #615, MIAMI, FL 33178-2924.

ARTICLE IV

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

Managing Member CARLOS BERMUDEZ ARGIZ 2700 SW 154TH COURT MIAMI, FL 33178 Managing member
JENNIFER FRAGA OTERO
2700 SW 154TH COURT
MIAMI, FL 33178

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TALLAHASSEE FLORIDA

ARTICLE V

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

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

TERRANORTE INVESTMENTS, 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.

ABANAS & 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 penaltics of perjury that the facts stated herein are true.)

JOSEPH F. CABANAS

Typed or Printed Name of Signee

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