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ELORIDA/FOREIGN LIMITED LIABILITY CO.

CAPE-CO, LLC

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ARTICLE OF ORGANIZATION

OF

CAPE-CO. LLC

The undersigned hereby subscribes to these Articles of Organization for a Limited Liability Company under the Laws of the State of Florida.

ARTICLE I

The name of this limited liability company is:

CAPE-CO, LLC

ARTICLE II

The mailing address of the principal office of this limited liability company shall be 2851 NE 183 ST #712-E Aventura, Fl 33160 and such other place or places as the members from time to time may determine.

The name and address of the initial registered agent is:

GIOVANA ACHURY

2851 NE 183 ST #712-E Aventura, Florida 33160

ARTICLE III

The period of duration for the limited liability Company shall be perpetual unless sooner dissolved in accordance with the laws of the State of Florida. The date of existence shall begin upon the filing of these Articles of Organization and upon acceptance by the Secretary of State. This limited liability company may engage in any activity or business permitted under the laws of the United States and the laws of the State of Florida. Without limiting any of the purposes, powers and objects of this limited liability company it is expressly declared and provided that his limited liability company shall have power in carrying on its own business, or for the purpose of accomplishment of any of the purposes or attainment of its objects, to make and perform contracts of any kind and description and to do any and all other acts, to exercise any and all powers either as principal, agent or broker, conferred by the laws of Florida upon limited liability companies, and which a partnership or natural person could do and exercise, and which now or hereafter may be authorized by law.

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ARTICLE IV

The Limited Liability Company shall be managed by the members with voting power prorate to their interest. The right and duties of the members shall be set forth in the regulations of this limited liability company, which are incorporated herein by reference.

The names and addresses of the initial members of this limited liability company are:

Giovana Achury

2851 NE 183 St #712-E Aventura, Fl 33160

Maria Inca Ordonez 2851 NE 183 St #712-E Aventura, Fl 33160

Guillermo A. Achury 2851 NB 183 St#712-E Aventura, Fl 33160

Ana Lucia Vergara-Huertas

2851 NE 183 St #712-E Aventura, Fl 33160

The name and address of the managing members are:

Giovana Achury

2851 NB 183 St #712-E

Aventura, Fl 33160

Maria Ines Ordonez

2851 NE 183 St #712-E

Aventura, Fl 33160

Guillermo A. Achury

2851 NE 183 St #712-E Aventura, Fl 33160

Ana Lucia Vergara-Huertas

2851 NE 183 St #712-E Aventura, Fl 33160

ARTICLE V

In the event of withdrawal, retirement, bankruptcy or dissolution of a member, or the occurrence of any other event which terminates the continued membership of a member, this limited liability company shall remain in existence and continue in business pursuant to the applicable provisions of the regulations.

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ARTICLE VI

The members of the limited liability Company shall adopt regulations containing all provisions for the regulation and management of this company, which shall be consistent with the law or these articles.

ARTICLE VII

A member's interest in this limited liability company may be transferred only with the unanimous written consent of all remaining members if the transferred intends to become a member.

ARTICLE VIII

These articles may be amended at any time by the unanimous consent of the members as deemed appropriate to facilitate the accomplishment of the purpose of the limited liability Company, and the amendment shall be executed and duly filed with the Florida Department of State.

The undersigned authorized representatives Analucia Vergara-Huertas, Maria-Ines Ordonez, Guillermo A. Achury, Giovana Achury members of CAPE-CO, LLC. Deposes and says:

The above named limited liability Company has four members.

Sugar of Authorized Representative of Member

And Dergova-Huertas
Name of Authorized Representative of Member

Signature of Authorized Representative of Member

Name of Authorized Representative of Member

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ve of Member acd Representa Name of Authorized Representative of Manager Signature of Authorized Repositionative of Municipal

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CERTIFICATE OF DESIGNATION OF RECISTEDED AGENT/RECISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608 415, PLORIDA STATUTES, THE UNDERSEGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/BEGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is:

CAPE-CO, LLC

The mans and address of the registered agent and office is:

GIOVANA ACEIORY

2851 NE 183 ST 8712-E Aventure, Physica 33160

Naving been named at registered apost and to apost service of process for the above stated limited liability conspany at the place designated in this certificate, I hereby except the approintment as togethered agent and agree to act in this carrecity. I finisher surrow to comply with the provisions of all statues relating to the proper and complete performence of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent.

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