Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

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

FLORIDA/FOREIGN LIMITED LIABILITY CO.

acqualina 1809, llc

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ARITCLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-Name:

The name of the Limited Liability Company is: ACQUALINA 1809, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address: 2000 Island Blvd., PH-10 Aventura, FL 33160 Mailing Address: 2000 Island Blvd., PH-10 Aventura, FL 33160

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must design individual or another business entity with an active Florida registration.)

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

Name: Andrey NERODENKOV

Florida street address (P.O. Box NOT acceptable):

2000 Island Blvd., PH-10 Aventura, FL 33160

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, 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 as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

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The name and address of each Manager or Manager			
<u>Title</u> : "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGR	Andrey NERODENKOV 2000 Island Blvd., PH-10 Aventura, FL 33160		
MGRM	Anna KRUGLOVA - ARUTYUNYA 2000 Island Blyd., PH-10 Aventura, FL 33160	N	:
MGRM	Aventura, FL 33160	296 APR 19 AM 10: 2	SECRETARY OF STATE
(Use attachment if necessary)	; ;	27	<u> </u>
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sp days prior to or 90 days after the date of filing.) REQUIRED SIGNATURE:	ecific and cannot be more than five bu	•	ess
Signature of a member or an authorized representat	ive of a member.		
In accordance with section 608.408(3), Florida Statutes affirmation under the penalties of perjury that the facts a		an	·
Andrey NERODENKOV Typed or printed name of signee	-		;

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