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FLORIDA/FOREIGN LIMITED LIABILITY CO.

east west hemisphere group, l.l.c.

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

EAST WEST HEMISPHERE GROUP, L.L.C.

ARTICLE I

**The name of the Limited Liability Company shall be:
EAST WEST HEMISPHERE GROUP, L.L.C.**

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 : 2103 CORAL WAY, SUITE 302, MIAMI, FL
33145.**

ARTICLE IV

**The name and the Florida street address of the registered agent:
MAURICIO HERRERA, 881 OCEAN DRIVE, APT. 11A, KEY BISCAVNE, FL
33149.**

ARTICLE V

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

**MANAGING MEMBER/MEMBER
MAURICIO HERRERA**

**MANAGING MEMBER/MEMBER
PAOLA HERRERA**

**MANAGING MEMBER/MEMBER
ANTONIO JOSE DEL DAGO**

**MANAGING MEMBER/MEMBER
JUANITA LOPEZ**

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

East West Hemisphere Group, LLC

2. The name and the Florida street address of the registered agent and office are:

Mauricio Herrera
(Name)

881 Ocean Drive, Apt: 11A
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Key Biscayne, FL 33149
City/State/Zip

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, Florida Statutes.

 MHA
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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