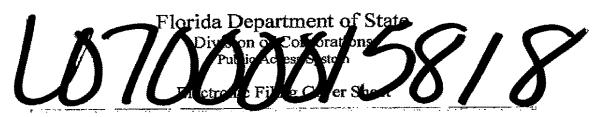
Division of Corporations

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Division of Corporations

Fax Number : (850)205-0383

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: I20010000247 : (800)494-3124 Phone Fax Number : (305)675-2811

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## C.F. MANAGEMENT, LLC

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## ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

C.F. MANAGEMENT, LLC

ARTICLE II ADDRESS

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

3300 NE 192ND ST APT 416

AVENTURA, FL 33180-2429

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT.

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

CLAUDIA P. COLLAZOS 3300 NE 192ND ST APT 416

AVENTURA, FL 33180-2429

Having been named as registered agent 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.

CLAUDIA P. COLLAZOS / Registered Agent's Agent

The Limited Liability Company is to be managed by one or more members and is, therefore, a member-managed company.

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PAGE 2 C.F. MANAGEMENT, LLC

ARTICLE V MEMBERS (optional)

MANAGING MEMBER: CLAUDIA P. COLLAZOS 3300 NE 192ND ST APT 416 AVENTURA, FL 33180-2429 07 FEB 12 AM 9: 5
SECRETARY OF STAT

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Fiorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

CLAUDIA P. COLLAZOS

Typed or printed name of signee