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SECRETARY OF STATE DIVISION OF CORPORATIONS

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COVER LETTER

	itration Section ion of Corporations		
SUBJECT:	Vistas Internationa	al Realty Network, LLC.	
_	(Name of Lim	ited Liability Company)	
The enclosed A	Articles of Organization and fee(s) ar	e submitted for filing.	·
Please return a	ll correspondence concerning this ma	atter to the following:	
	E	rick E. Farfan	
		(Name of Person)	
	Vistas Interna	tional Realty Network, LLC.	m
		(Firm/Company)	NISI 071
	2601 S. Ba	yshore Dr. Suite 1100	でいい。
		(Address)	COR
	Miam	ni Florida 33133	PH 3:
	(C	ity/State and Zip Code)	110NS 1: 25
For further infe	ormation concerning this matter, plea	se call:	
Er	ick E. Farfan	at (305) 854-1900	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a	check for the following amount:		
∐\$125.00 Fili₁	ng Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certified Copy Certificate of Certified Copy (additional copy is enclosed)	f Status & py
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32301

ARTICLE I - Name:	is: Sal Realty Network, LLC. Part Par
The name of the Limited Liability Company	is:
, ,	7 686
Vistas Internation	al Realty Network, LLC.
45-	iability Company, "L.L.C.," or "LLC.")
ADTICLE II Addison	50 50
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
	principal critics of the Billion Blackhy Company 15.
Principal Office Address:	Mailing Address:
2601 S. Bayshore Dr. Suite 1100 Miami FI 33133	2601 S. Bayshore Dr. Suite 1100 Miami Fl 33133
ARTICLE III - Registered Agent, Register	red Office, & Registered Agent's Signature:
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	ne registered agent are:
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	egistered Agent. You must designate an individual or another ne registered agent are: EFFECTIVE DA O O O O O O O O O
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the Erick E. F	egistered Agent. You must designate an individual or another ne registered agent are: arfan me
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(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the Erick E. F. Nat. 2601 S. Baysh Florida street Miami, FL 3313	egistered Agent. You must designate an individual or another ne registered agent are: arfan me hore Dr. Suite 1100 address (P.O. Box NOT acceptable)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	O VI
MGRM	Ignacio X. Hawley 2601 S. Bayshore Dr. Suite 1100 Miami Fl 33133
MGRM	Francis N. Hawley 2601 S. Bayshore Dr. Suite 1100 Miami Fl 33133
MGRM	Erick E. Farfan 2601 S. Bayshore Dr. Suite 1100 Miami Fl 33133
(Use attachment if necessary)	
	the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	MM
(In accordance wi	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.)
that the facts sta	ERICK E. FARFAN Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)