Florida Department of State **Division of Corporations** Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6383

AUG - 6 2009

EXAMINER

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146

Phone

: (305)444-4994

Fax Number

: (305)444-4977

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CORAL FINANCING LLC

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Certificate of Status Certified Copy 1 04 Page Count \$155.00 Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Coral F | inancing LLC | | | |
|--|---|--|--|--|
| (Must end with rite words "Lim | sleed Liability Company," "L.L.C.," or "LLC.") | | | |
| ARTICLE II - Address: | | | | |
| The mailing address and street address of the principal office of the Limited Liability Company is | | | | |
| Principal Office Address: | Mailing Address: | | | |
| 3011-33 N.W. 38 Street | 3011-33 N.W. 36 Street | | | |
| · · · · · · · · · · · · · · · · · · · | Miami, FL 33142 | | | |
| (The Limited Linbility Company conner serve as its | Miami, FL .33142 gistered Office, & Registered Agent's Signature: own Rogistered Agent. You must designate an individual or another | | | |
| ARTICLE III - Registered Agent, Ro (The Limited Limbility Company causer serve as its business entity with an active Florida registration.) | gistered Office, & Registered Agent's Signature: own Rogistered Agent. You must designate an individual or anotice | | | |
| ARTICLE III - Registered Agent, Re (The Limited Linbility Company causer serve as its business entity with an active Florida registration.) The name and the Florida street address | gistered Office, & Registered Agent's Signature: own Rogistered Agent. You must designate an individual or anotice | | | |
| ARTICLE III - Registered Agent, Re (The Limited Linbility Company causer serve as its business entity with an active Florida registration.) The name and the Florida street address | gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: | | | |
| ARTICLE III - Registered Agent, Re (The Limited Linbility Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Avel | gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: A. Gonzalez, PA | | | |
| ARTICLE III - Registered Agent, Re (The Limited Linkility Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Avel | gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: A. Gonzalez, PA Name | | | |
| ARTICLE III - Registered Agent, Re (The Limited Linkility Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Avel | gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: A. Gonzalez, PA Name SW 137 Avenue | | | |

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 fumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRAD)

(CONTINUED)

SECRETARY OF STATE

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| (Use attachment if necessary) | Mlami, FL 33142 |
| LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) | date of filing:, (OPTIONAL) e specific and cannot be more than five business days p |
| REQUIRED SIGNATURE: | DAG D |
| Signature of a membe | er of all nutrorized representative of a member. |
| (In accordance with secondance with second consistence of this document consistence that the facts stated here | ction 608.408(3), Florida Statutes, the execution fitures an affirmation under the penalties of perjury rein are true.) |
| | Avel A. Gonzalez |
| Filing Fees: | ped or printed name of signes |
| \$125.00 Filing Fee for Articles of Orga | inization and Designation |
| of Registered Agent \$ 30.00 Certified Copy (Optional) | • |
| | |

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CONTINUATION:

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title; Name and Address:

"MGR" = Manager

"MGRM" - Managing Member

MGR

Estaban Maximiliano Bortnik

3011-33 NW 36 Street

Miami, FL 33142

MGR

Arnaldo Bortnik

3011-33 NW 36 Street Miami, FL_33142