Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

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Account Name : C T CORPORATION SYSTEM

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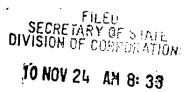
**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:				

FLORIDA LIMITED LIABILITY CO. Optimus US 10350 W. Bay Harbor Dr., L.L,C.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

11/24/2010



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compar	ny is:	
Optimus US 10350 W	Bay Harbor Dr., L.L.	<u>C.</u>
(Must end with the words "Limited	Liability Company," "L.L.C.," or "L	LC:-)
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Li	mited Liability Company is:
Principal Office Address:	Mailing Address:	
Attn: Eduardo Labella	Attn: Eduardo Lab	ella
Carace 543, Apto 1	Carace 543, Apto 1	L
11302 Montevideo, Unuquay	11302 Montevideo	<u>Uniquay</u>
	oration System	_
İ	Name	
	Pine Island Road	
Florida street uddress	(P.O. Box NOT acceptable)	
Plantation	FL	- -
City, S	itasc, and Zip	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and comple accept the obligations of my position as	ed in this certificate, I hereby i pacity. I further agree to con ete performance of my duties,	accept the appointment as uply with the provisions of all and I am familiar with and
James	nen-	JAMES M NEWSPIME
Roughtered Agent's	Signature (REQUIRED)	Special Analounal Secretary

(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> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGRM	Optimus US Properties Holdings, L.L.C.	•	
	Atto: Eduardo Labella		
	Caraca 543, Apto 1		
	11302 Montevideo, Uruguay		
			
RTICLE V: Effective date, if other than the lift an effective date is listed, the date must be or 90 days after the date of filing.)	e date of filing: (OPTIONAl se specific and cannot be more than five business days	L) s prior	
<u>REQUIRED</u> SIGNATURE:			
TUM	a Calinsh.		-
Signature of a memb	er or an authorized representative of a member.	=	Σĭ
	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury trein are true.)	TO NOV	SION
	enski, Authorized Representative	24	- H. S.
Filing Feat:	yped or printed name of signee		15 Sec. 1
\$125,00 Fitting Fee for Articles of Org	entration and Designation	çç	30
of Registered Agent	_	ငှာ ယ	≥≥
\$ 30.00 Certified Copy (Optional)	15	دئن	57
\$ 5.00 Certificate of Status (Options	u)		-