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Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
ALANAR AGRICULTURE LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ALANAR AGRICULTURE LLC

ARTICLE I – Name

The name of the Limited Liability Company is:

ALANAR AGRICULTURE LLC

ARTICLE II – Address

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

Principal Office Address:

2070 NW 79 AVE
DORAL, FL 33122

Mailing Address:

7322 SW FREEWAY, SUITE 1100
HOUSTON, TX 77074

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ARMANDO HERNANDEZ, CPA, PA
2320 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

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



Registered Agent's Signature (REQUIRED)

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(Continued)

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:

**Inversiones Alazar, CA., managing member
Av Andres E. Blanco, CCP Seala Oficina 203
Valencia 2001, Venezuela**

ARTICLE V: Effective date, if other than the date of filing 02/11/11.
(OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of Member or an authorized representative of a member

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware the any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jose Alberto Merinsky

Typed or printed name of signer