L110000 79640

(Requestor's Nar	ne)
(Address)	
(Address)	
(City/State/Zip/PI	none #)
PICK-UP WAIT	MAIL
(Business Entity	Name)
(Document Num	per)
Certified Copies Certific	ates of Status
Special Instructions to Filing Officer:	
	<u>.</u>
	;

Office Use Only

B. KOHR

JUL 1 2 2011

EXAMINER



500209816485

NOT INTENCED TO ACKNOWLEDGE

NCCEIVED

OFPARIMENT OF STATE

OFFICE OFFICE

BIVISION OF CORPORATIONS

11 JUL 11 AM 9: 05



ACCOUNT	NO.	:	I20000000195

REFERENCE: 841167

AUTHORIZATION :

COST LIMIT :

ORDER DATE : July 11, 2011

ORDER TIME : 1:29 PM

ORDER NO. : 841167-005

CUSTOMER NO: 7841947

DOMESTIC FILING

NAME: VIVENTURA LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XXX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XXX PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young - EXT. 2962

EXAMINER'S INITIALS:

COVER LETTER

то:	Registration Section Division of Corporations	
SURJE	CT: viventura LLC	
	Name of Lim	ited Liability Company
The encl	losed Articles of Organization and fee(s) ar	e submitted for filing.
Please re	eturn all correspondence concerning this ma	atter to the following:
<u> </u>	Matt Dickhaus	
		Name of Person
7	Viventura LLC	
		Firm/Company
1	4849 N. Dale Mabry Highway, Suit	
		Address .
<u>T</u>	Tampa, FL 33618	
	C natt@viventura.com	ity/State and Zip Code
		for future annual report notification)
For furth	ner information concerning this matter, pleas	se call:
Matt D	ickhaus	at (909) 293-8759
	Name of Person	Area Code & Daytime Telephone Number
Enclose	d is a check for the following amount:	
⊠ \$125.00 }	Filing Fee \$\bigcup \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR F	LORIDA LIMITED LIABILITY COMPANE
ARTICLE I - Name: The name of the Limited Liability Company is	FLORIDA LIMITED LIABILITY COMPANY s:
viventura LLC	
(Must end with the words "Limited Liab	bility Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the period of the Principal Office Address:	principal office of the Limited Liability Company is: Mailing Address:
14849 N. Dale Mabry Highway	14849 N. Dale Mabry Highway
Suite 113	Suite 113
Tampa, FL 33618	Tampa, FL 33618
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You must designate an individual or another
Corporation Service Compa	
Nam	e
1201 Hays Street Florida street ad	ddress (P.O. Box <u>NOT</u> acceptable)
Tallahassee Cin. S	FL 32301

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

Corporation Service Company

(Registered Agent's Signature (REQUIRED)

Karin L. Dunn, Assistant VP

(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:

Member	Andre Kiwitz	
•	Circular 74a # 39b - 99	
,	Medellin, Colombia	
Member	Hendrik Moorahrend	
•	Trans 39A #71-106	
	Medellin Colombia	
Member	Matt Dickhaus	
	Carrera 41sur 80 Apt. 401	
	Envigado, Colombia	
,		-
		
Use attachment if necessary)		
E.V. Effective data if other than the	e date of filing:	COPTIC

REQUIRED SIGNATURE:

Signature of a 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 that 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.)

Matt Dickhaus, Member

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)