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Account Number : I20020000094 Phone : (770)777-2091

Phone : (770)777-2091 Fax Number : (770)220-1943

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FLORIDA LIMITED LIABILITY CO. TORTOSA CAPITAL LLC

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EXAMINER

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ARTICLES OF ORGANIZATION

OF

TORTOSA CAPITAL LLC

(A FLORIDA LIMITED LIABILITY COMPANY)

ARTICLE I

The name of the Limited Liability Company is Tortosa Capital LLC.

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 201 S. Biscayne Boulevard, Floor 28, Miami, Florida 33131-4309.

ARTICLE III DURATION

The period of duration for the limited liability company shall begin on the date of filing these Articles of Organization with the Florida Secretary of State and shall have a perpetual existence and duration, until terminated in accordance with applicable law.

ARTICLE IV INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Limited Liability Company's initial registered agent are NRAI Services, Inc., 2731 Executive Park Drive, Suite 4, Weston, Florida 33331.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 12th day of July, 2011.

Ænthonÿ J. Mázsico Authorized Representative

(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.)

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CERTIFICATE OF ACCEPTANCE BY REGISTERED AGENT

Pursuant to the provisions of the Florida Limited Liability Company Act, the undersigned submits the following statement in accepting the designation as registered agent of Tortosa Capital LLC, a Florida Limited Liability Company (the "Company"), in the Company's Articles of Organization:

Having been named as registered agent and to accept service of process for the Company at the registered office designated in the Company's Articles of Organization, the undersigned accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and the undersigned is familiar with and accepts the obligations of its position as registered agent.

IN WITNESS WHEREOF, the undersigned has executed this Certificate this 12th day of July, 2011.

NRAI SERVICES, INC.

Assistant

Name:

Title:

SECRETARY OF STA

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