

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
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FLORIDA LIMITED LIABILITY CO.  
ROBSE 305 LLC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY OF**

**ROBSE 305 LLC**

**ARTICLE I**

**The me of the Limited Liability Company shall:**

**ROBSE 305 LLC**

**ARTICLE II**

**The Company is organized for any legal and lawful purpose for which a  
limited liability company may be organized pursuant to the Act.**

**ARTICLE III**

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

**1835 NE MIAMI GARDENS DRIVE #173  
NORTH MIAMI BEACH, FL 33179**

**ARTICLE IV**

**The Company shall commence business on: FEBRUARY 2, 2012.**

**ARTICLE V**

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

**PABLO GAMPEL  
1835 NE MIAMI GARDENS DRIVE #173  
NORTH MIAMI BEACH, FL 33179**

**ARTICLE VI**

**The name of the Manager(s) shall be:**

**MANAGER  
ROBERTO D. SESIN  
1835 NE MIAMI GARDENS DRIVE #173  
NORTH MIAMI BEACH, FL 33179**

**MANAGER  
GABRIELA CIRINO  
1835 NE MIAMI GARDENS DRIVE #173  
NORTH MIAMI BEACH, FL 33179**

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CORPORATE SERVICES DIVISION

H/120000 28811

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED  
OFFICE/MEMBER/REPRESENTATIVE**

ROBSE 305 LLC  
(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability company at the place designated in the articles of organization, 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.

☒    
Registered Agent Pablo Campes

☒    
Signature of a member or an authorized representative of a member.

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TALLAHASSEE, FLORIDA

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(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.)

Roberto D. Sesin  
Typed or printed name of signee

H/120000 28891