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FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
OLIMPO CONDOMINIUM 1111 LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

**A. LUNT**

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**EXAMINER**

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

OLIMPO CONDOMINIUM 1111 LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

2500 PARKVIEW DR APT 1111  
HALLANDALE, FL 33009-2808

Mailing Address:

ALEJANDRO GOLDMAN  
C/O CRUZ GORRIAS + ASSOC  
7175 SW 8 ST #216  
MIAMI, FL 33144

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:

Alejandro Goldman  
Name  
2500 PARK VIEW DR APT 1111  
Florida street address (P.O. Box NOT acceptable)  
HALLANDALE FL 33009-2808  
City, State, and Zip

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.

Alejandro Goldman  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**MGR

ALEJANDRO ALBERTO GOLDMAN  
CULPINA 837  
1406 - CABA ARGENTINA


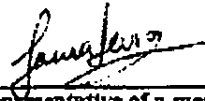
MGR

LAURA NOEMI LEVIN  
CULPINA 837  
1406 - CABA ARGENTINA

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: JUNE 1, 2012. (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 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.)

ALEJANDRO ALBERTO GOLDMAN  
Typed or printed name of signer

**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)

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