

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  
Fax Number : (305) 633-9696

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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**FLORIDA LIMITED LIABILITY CO.  
TERRAMORA INVESTMENTS, LLC**

Certificate of Status	0
Certified Copy	1
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SEP 28 2012

**EXAMINER**

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9/27/2012

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
TERRAMORA INVESTMENTS, LLC**

**ARTICLE I - Name**

The name of the Limited Liability Company is: **TERRAMORA INVESTMENTS, LLC**

**ARTICLE II - Address**

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

1053 SEQUOIA LANE  
Weston, FL 33327

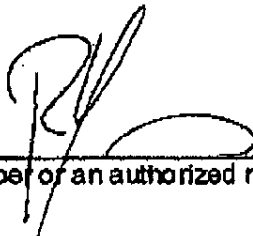
**ARTICLE III- Manager(s) or Managing Member(s):**

The number of persons constituting the Board of Directors of this corporation shall be four (04) Initially. The name and street address of the managing members are:

RICARDO NARVAEZ, MGR  
ALEJANDRO CAICEDO, MGRM  
JUAN FERNANDO OLAVE, MGRM  
MILTON VASQUEZ, MGRM

1053 SEQUOIA LANE  
Weston, FL 33327

REQUIRED SIGNATURE:



Signature of a member of 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)

\_\_\_\_\_  
Typed or printed name of signee

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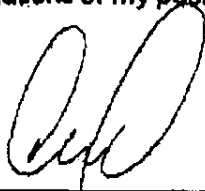
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#### ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The initial Registered Office and Agent of this Corporation shall be:

CONSTANZA LEMOS  
1053 SEQUOIA LANE  
Weston, FL 33327

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.



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CONSTANZA LEMOS  
Registered Agent's Signature

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