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Email Address:

FLORIDA LIMITED LIABILITY CO.

Terranoble Properties LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

P.001/003

1099 728 808

1099 728 808

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FAX AUDIT # H12000243362 3

ARTICLES OF ORGANIZATION OF Terranoble Properties LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Terranoble Properties LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 7450 Dr Phillips Blvd., Ste 300, Orlando, Florida 32819.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 515 E. Park Avenue, Tallahassee, Florida 32301. Located in the County of Leon.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the managers and the name and address of the manager of the Limited Liability Company is:

Floy Empreendimentos E Participacoes Ltda, Rua Capote Valente 1443, Sao Paulo, 05409-003 Brazil

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

WI 53717

608-827-5300

FAX AUDIT # H12000243362 3

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Date: October 5, 2012

FAX AUDIT # H12000243362 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Terranoble Properties LLC

The name and address of the registered agent and office is Business Filings Incorporated, 515 E. Park Avenue, Tallahassee, Florida 32301. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

orginature.

Mark Williams, A.V.P. Business Filings Incorporated

Date: October 5, 2012

FAX AUDIT # H12000243362 3

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA.