

DEC-14-2012 04:01PM

FR - AKERMAN SENTERFITT

305 374 5095

974 300 7800 F-803

L12000156912

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000293782 3)))



H120002937823ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : AKERMAN SENTERFITT (MIAMI)
Account Number : 075471001363
Phone : (305) 374-5600
Fax Number : (305) 374-5095

FILED
2012 DEC 14 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

RECEIVED
12 DEC 14 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
GIGAS HOSTING USA, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

A. LUNT

DEC 17 2012

EXAMINER

Electronic Filing Menu Corporate Filing Menu

Help

(H12000293782 3)

FILED
2012 DEC 14 PM 12:43
CLERK OF STATE
TALLAHASSEE, FLORIDAARTICLES OF ORGANIZATION
OF
GIGAS HOSTING USA, LLC

ARTICLE I: - Name

The name of the Limited Liability Company is GIGAS HOSTING USA, LLC

ARTICLE II: - Address

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

c/o Pedro Freyre
One SE Third Avenue, 25th Floor
Miami, FL 33131

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

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

NRAI SERVICES, INC.
515 East Park Avenue
Tallahassee, FL 32301

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.

NRAI SERVICES, INC.

By: *Michelle Holden*
Name: Michelle Holden
Title: Assistant Secretary

ARTICLE IV: - Management

☒ The Limited Liability Company is to be managed by one Member or more Members and is, therefore, a member - managed company.*Pedro A. Freyre*
Pedro A. Freyre, 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.)

Pedro A. Freyre
Typed or printed name of signer