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Division of Corporations

Florida Department of State  
Division of Corporations  
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FLORIDA LIMITED LIABILITY CO.  
Saltek Miami LLC.

Certificate of Status	0
Certified Copy	1
Page Count	02
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**EFFECTIVE DATE**  
4-29-2013

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**ARTICLES OF ORGANIZATION FOR SALTEK MIAMI LLC,  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Saltek Miami LLC.

**ARTICLE II - Address:**

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

**Principal Office Address:**

1000 Island Blvd., Unit 1405  
Williams Island, Aventura, FL 33160

**Mailing Address:**

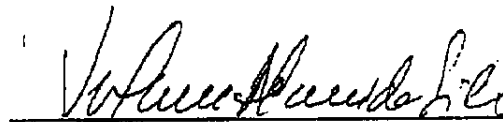
1000 Island Blvd., Unit 1405  
Williams Island, Aventura, FL 33160

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

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

Verlaine Adami Da Silva  
1000 Island Blvd., Unit 1405  
Williams Island, Aventura, FL 33160

*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.*



Verlaine Adami Da Silva

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

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

**Title:**

"MGR" = Manager  
"MGRM" = Managing Member  
"M" = Member

**Name and Address:**

MGR

Verlaine Adami Da Silva  
1000 Island Blvd., Unit 1405  
Williams Island, Aventura, FL 33160

M

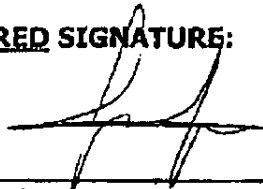
Alberto Salpietro  
1000 Island Blvd., Unit 1405  
Williams Island, Aventura, FL 33160

M

Vincenzo Salpietro  
1000 Island Blvd., Unit 1405  
Williams Island, Aventura, FL 33160

**ARTICLE V:** Effective date, if other than the date of filing: April 29<sup>th</sup>, 2013.

**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.)

\_\_\_\_\_  
Alberto Salpietro

Typed or printed name of signee