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.

(((H140000533373)))



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 LLP - MIAMI

Account Number : 075471001363 Phone

: (305)374-5600

Fax Number

: (305)374-5095

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

Email	Address:	

FLORIDA LIMITED LIABILITY CO. **B4 AMERICAS LLC**

Certificate of Status	 	1	
Certified Copy	 	1	₩ #. *.
Page Count	 	02	
Estimated Charge	 \$1	60.00	ij
الباران ومصفحه والرابان وفالمبتيث والهدمان المساحة والهدارة	 بنسطتم الدروان	يحسن بعين برايان	

Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efileovr.exe

3/4/2014

N. Gulligen MAR - 0 7914

3053745095

FTF634 F F02/002 F-82

H14000053337 3

2014 NAR -4 AM 8: 13

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION OF B4 AMERICAS LLC

ARTICLE I: - Name

The name of the Limited Liability Company is B4 AMERICAS LLC

ARTICLE II: - Address

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

Pedro A. 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. 1200 S. Pine Island Road Plantation, FL 3332

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 605, F.S.

NRAI SERVICES, INC.

Name: Katie Wonsch

Tille: Assistant Secretary

ARTICLE IV: - Management

The Limited Liability Company is to be managed by one Authorized Member or more Authorized Members and is, therefore, a member - managed company.

Pedro A. Freyre, Authorized Representative

(In accordance with section 605.0203 (1) (b), 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.)

Pedro A. Freyre
Typed or printed name of signee

(2)259489:11 H14000053337 3