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T. BROWN

	Registration Division of C	Section Corporations		i.	7
*					•
SUBJEC	T: La Cos	ta Investments			
		Name of Lir	nited Liability Con	npany	
		of Organization and fee(s) as		_	
Please ret	urn all corre	spondence concerning this m	atter to the followi	ng:	
	Karina Pi	rado			
			Name of Person		
	<u></u>		Firm/Company		
	3106 Roc	drick Cir.			
			Address		
	Orlando,	Florida 32824			
		······································	ity/State and Zip C	ode	
gcan	nelo82@ho	tmail.com			
 		E-mail address: (to be used	for future annual	report notifica	ation)
For furthe	r information	n concerning this matter, plea	ase call:		
Karina P	rado	at (4	107 \ 1730	9107	• •••
- Tanita i		e of Person	Area Code		lephone Number
				•	• .
Enclosed i	s a check for	r the following amount:			
□ \$125.00 F	iling Fee	\$130.00 Filing Fee & Certificate of Status	✓\$155.00 Filing Certified Copy (additional copy	y	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			1 = A
The name of the Limited	Liability Company is:		C.") Vis:
La Costa Investments	LLC		
(Mt	ust end with the words "Lim	ited Liability Company, "L.L.C.," or "LL	C.")
ARTICLE II - Address:		•	70 72
		al office of the Limited Liability Compan	y is:
Principal Office Addres	<u>ss:</u>	Mailing Address:	7
3106 Rodrick Cir		3106 Rodrick Cir	
Orlando Fl, 32824		Orlando FI, 32824	
	a street address of the registe Karina Prado	ered agent are:	
_		ıme	
<u>-</u>	106 Rodrick Cir		
•	Florida street address (P.O. l	Box NOT acceptable)	
<u></u>	Orlando	FL 32824	
	City	Zip	
Having been named as re	egistered agent and to accept	t service of process for the above stated lin	

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(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
	
MGR	Karina M. Prado
	3106 Rodrick Cir.
	Orlando FI, 32824
MGR	Carlos Augusto Martinez
	3106 Rodrick Cir
	Orlando FI, 32824
MGR	Gabriel Felipe Camelo
	3106 Rodrick Cir
EV: Effective date, if other than the ctive date is listed, the date must	Orlando Fl, 32824 e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90
ctive date is listed, the date must f filing.)	e date of filing: (OPTIONAL)
EV: Effective date, if other than the ctive date is listed, the date must	e date of filing: (OPTIONAL)
EV: Effective date, if other than the ctive date is listed, the date must filling.)	e date of filing: (OPTIONAL)
V: Effective date, if other than the ctive date is listed, the date must filing.) VI: Other provisions, if any. REQUIRED SIGNATURE:	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the ctive date is listed, the date must filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with section constitutes an affirmation I am aware that any false)	e date of filing: (OPTIONAL)

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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)