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Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
EL AGUILA DEL NORTE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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December 16, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: EL AGUILA DEL NORTE, LLC
REF: W14000074672

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan
Regulatory Specialist II

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P.O BOX 6327 ~ Tallahassee, Florida 32314

414000286721

**ARTICLES OF ORGANIZATION FOR EL ÁGUILA DEL NORTE, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I
Name**

The name of the Limited Liability Company is:

EL ÁGUILA DEL NORTE, LLC

**ARTICLE II
Address**

The mailing address and street address of the principal office of the Limited Liability Company is: 2500 Weston Road, Suite 213, Weston, FL 33331.

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

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

Michael J. Eisler, Esq.
Straus & Eisler, P.A.
2500 Weston Road, Suite 213
Weston, Florida 33331

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.



Michael J. Eisler
Registered Agent's Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE IV
MANAGER(S) or MANAGING MEMBER(S)**

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

Title

Name and Address

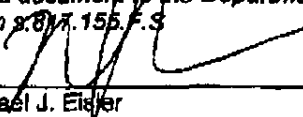
Managing Member

Maria Edith Anselmi Rizo
c/o 2500 Weston Road, Suite 213
Weston, FL 33331



Michael J. Eisler
Authorized Representative

In accordance with Section 605.0203(b) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct. 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.



Michael J. Eisler

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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