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(Requestor's Name)

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(City/State/Zip/Phone #)

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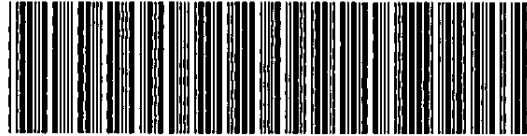
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 19, 2014

LARRY ADAIR PA
9715 W BROWARD BLVD SUITE 303
PLANTATION, FL 33324

SUBJECT: INVESTIS AMERICAS, LLC
Ref. Number: W14000075446

We have received your document for INVESTIS AMERICAS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 714A00026867

**ARTICLES OF ORGANIZATION
Of
INVESTIS AMERICAS, LLC**

THE UNDERSIGNED BEING DULY AUTHORIZED TO ACT AS THE ORGANIZER OF THIS LIMITED LIABILITY COMPANY PURSUANT TO CHAPTER 605, *FLORIDA REVISED LIMITED LIABILITY COMPANY ACT*, AND SECTION 605.0201, FLORIDA STATUTES, HEREBY FORMS A LIMITED LIABILITY COMPANY UNDER THE LAWS OF THE STATE OF FLORIDA AND ADOPTS THE FOLLOWING ARTICLES OF ORGANIZATION FOR SUCH LIMITED LIABILITY COMPANY.

ARTICLES I. NAME OF THE LIMITED LIABILITY COMPANY

The name of the limited liability Company is and shall be:

INVESTIS AMERICAS, LLC

ARTICLES II. PRINCIPAL PLACE OF BUSINESS

The street address of the initial principal office and mailing address of the Company are:

12601 Northwest 115th Avenue
Suite A-102
Medley, Florida 33178

ARTICLE III. REGISTERED OFFICE AND REGISTERED AGENT

The street address of the initial registered office of the Company shall be:

12601 Northwest 115th Avenue
Suite A-102
Medley, Florida 33178

And, the registered agent of the Company at that address is:

Jose Machin

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TALLAHASSEE, FLORIDA

ARTICLE IV. MANAGEMENT AUTHORITY

The exclusive authority to manage the Company is vested in a manager or member managers that are appointed by the members, which shall operate in substantially the same manner, as and has substantially the same rights, powers, privileges, duties, and responsibilities as a board of directors of a company chartered as a corporation.

The name and address of the initial Managing Member of the Company is as follows:

Jose Machin
12601 Northwest 115th Avenue
Suite A-102
Medley, Florida 33178

ARTICLE V: GENERAL PURPOSE OF THE COMPANY

The general purposes for which the Company is organized are as follows:

- (1) The transaction of any and all lawful business for which limited liability companies may be organized to transact under Chapter 608, *The Florida Limited Liability Company Act*; and,
- (2) The development, construction and management of commercial and residential properties.

ARTICLE VI. CAPITAL REQUIREMENTS

The Company shall begin business with at least One Thousand And No/100 (\$1,000.00) Dollars in paid-in capital and shall maintain such minimum capital.

ARTICLE VII. EFFECTIVE DATE AND DURATION

The *Effective Date* of the Company shall be _____ and, the term of existence of the Company shall commence on that date, and shall continue perpetually, unless sooner dissolved in accordance with the laws of the State of Florida and the Operating Agreement of the Company. In no instance shall the Company be automatically terminated, dissolved, or operations suspended upon the occurrence of an event, including the death, disability, bankruptcy, expulsion, or withdrawal of a member of the Company, other than the passage of time as may be specified by law or the Operating Agreement of the Company. Provided, however, that upon any such termination event, the existence and business of the Company may be continued by amendment of these Articles Of Organization or the Operating Agreement providing for the continued existence of the Company as may be authorized by Florida Statutes.

ARTICLE VIII. LIMITED LIABILITY OF MEMBERS

No Member of the Company shall be liable for the debts, liabilities, or obligations of the Company in excess of the amount of the Member's investment.

ARTICLE IX. TRANSFER OF OWNERSHIP RIGHTS

A Member may not transfer an ownership interest in the Company, without the prior written consent of any other Member of the Company; and, any such transfer shall otherwise comply with all other and further requirements of the Operating Agreement of the Company.

ARTICLE X. LIMITATION ON AGENCY AUTHORITY OF MEMBERS

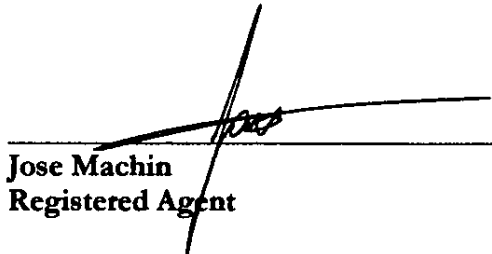
Pursuant to Section 608.4235, Florida Statutes, no Member of the Company shall be an agent for the Company solely by virtue of being a Member, and no Member shall have authority to incur debt or contractual liability on behalf of the Company solely by virtue of being a Member.

ARTICLE XI. EFFECTIVE DATE OF COMPANY

The *Effective Date*, if other than the date of filing, shall be:

STATEMENT OF ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for INVESTIS AMERICAS, LLC, the "Company", at the place designated in the foregoing *Articles Of Organization*, I hereby accept such appointment agree to act in such capacity. I further agree to comply with the provisions of all statutes relevant to the proper and complete performance of the duties of a registered agent, and I am familiar with, and accept the duties and obligations of Section 608.415 of the Florida Statutes.



Jose Machin
Registered Agent

IN WITNESS WHEREOF, the undersigned has made and subscribed these *Articles Of Organization* this 13 day of December, 2014.

MEMBER:

By Jose Machin

STATE OF FLORIDA :

COUNTY OF MIAMI-DADE :

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, the foregoing instrument was acknowledged before me by Jose Machin, who is personally known to me or who has produced FL. DR. LIC. as identification and who did not take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this _____ day of December, 2014.

NOTARY PUBLIC

Printed Name: JOSEPH CROSS

My Commission Expires: 5/21/2016

