

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L15000039932  
FILED 8:00 AM  
March 04, 2015  
Sec. Of State  
syong

**Article I**

The name of the Limited Liability Company is:  
DREAM VILLAS VACATION HOME LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
8964 COCO PALM  
KISSIMMEE, FL. US 34747

The mailing address of the Limited Liability Company is:  
6996 PIAZZA GRANDE AVE STE 216  
ORLANDO, FL. US 32835

**Article III**

Other provisions, if any:

THE INITIAL PURPOSE OF THIS LIMITED LIABILITY COMPANY IS  
PROPERTY INVESTMENTS AND ALL BUSINESS UNDER THE LAW OF THE  
STATE OF FLORIDA AND THE UNITED STATES OF AMERICA.

**Article IV**

The name and Florida street address of the registered agent is:  
ALESSANDRA B FARIA PEDRO  
6996 PIAZZA GRANDE AVE STE 216  
ORLANDO, FL. 32835

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.

Registered Agent Signature: ALESSANDRA B FARIA PEDRO

## **Article V**

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The name and address of person(s) authorized to manage LLC:

Title: AMBR  
ALESSANDRA B FARIA PEDRO  
RUA XAVIER DE ALMEIDA 918 APT 191A  
SAO PAULO, SP. 04211001 BR

Title: AMBR  
CLAUDINEI APARECIDO PEDRO  
RUA XAVIER DE ALMEIDA 918 APT 191A  
SAO PAULO, SP. 04211001 BR

Title: MGR  
VICTOR HUGO FARIA PEDRO  
RUA XAVIER DE ALMEIDA 918 APT 191A  
SAO PAULO, SP. 04211001 BR

Title: MGR  
AMANDA FARIA PEDRO  
RUA XAVIER DE ALMEIDA 918 APT 191A  
SAO PAULO, SP. 04211001 BR

Title: MGR  
NATALIA FARIA PEDRO  
RUA XAVIER DE ALMEIDA 918 APT 191A  
SAO PAULO, SP. 04211001 BR

## **Article VI**

The effective date for this Limited Liability Company shall be:

03/04/2015

Signature of member or an authorized representative

Electronic Signature: ALESSANDRA B FARIA PEDRO

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.