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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CORP USA Account Number: 072450003255 : (305) 634-3694 Phone

Fax Number : (305)633-9696

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Email Address:

## FLORIDA LIMITED LIABILITY CO. **BELLAMARE 1007, LLC**

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION FOR FLORIDA (ZMITED) XABILITY COMPANY
ARTICLE I - Nume:
The name of the Limited Liability Company is:
The state of the s
BELLAMARE 1007. LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
255 Alhambra Circle Ste 700 P.D. Box 3136, Road Town
Coral Gabra Fl. 38134 Tortola, British Virgin Islands
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)  The name and the Plorida street address of the registered agent are:
Peter J. Yanowitch
Name
DEE Albumbhan Clarks Color 700
255 Alhambra Circle, Suite 700 Florida street address (P.O. Box NOT acceptable)
I forted attreet gathers (1.0). Box NOT acceptable)
Corel Gables FL 33134
City Zip
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 505, F.S.

Registered Agent's Signature REQUIRED)

(CONTINUES)

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PAGE 02/03

ASU 9900

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Title:	Name and Address:
"AMBR" ≈ Authorized Member "MGR" = Manager	
MGR — Manager	Fera Investment and Development, I.TD
	P.O. Box 3138, Road Town
	Tortola, British Virgin Islands
	To co
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	7
IV: Effective date, if other than the date of fill effective date is listed, the date must be specific	ing: (OPTIONAL) and cannot be more than five business days prior to or 90 de
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(Use attachment if necessary)  E V: Effective date, if other than the date of filiretive date is listed, the date must be specific of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:	ing: (OPTIONAL) and cannot be more than five business days prior to or 90 de
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