

L15000050749

Florida Department of State
Division of Corporations
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To: Division of Corporations
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15 MAR 23 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FL 32399

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
TROIS TERRE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

REC'D
15 MAR 23 AM 10:00
TALLAHASSEE, FL 32399
SECRETARY OF STATE

EFFECTIVE DATE

3/24

MAR 24 2015

S. YOUNG

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TROIS TERRE, 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:

10000 W. BAY HARBOR DR STE 626
BAY HARBOR ISLAND FL 33154

SAME

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 Florida street address of the registered agent are:

MIGULE A SAPORITTO

Name

10000 W BAY HARBOR DR STE 525

Florida street address (P.O. Box NOT acceptable)

BAY HARBOR ISLAND

FL 33154

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 605, F.S.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV.

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGRM

Name and Address:

JOSE IGNACIO BLANO

10000 W BAY HARBOR DR STE 525

BAY HARBOR ISLAND FL 33154

MGRM

MONICA RUTH LILIANA HAOWIGER

10000 W BAY HARBOR DR STE 525

BAY HARBOR ISLAND FL 33154

MGRM

MALENA BLANCO

10000 W BAY HARBOR DR STE 525

BAY HARBOR ISLAND FL 33154

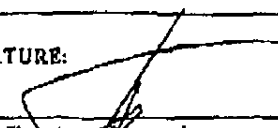
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: MARCH 24TH 2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

MIGUEL A SAPORITTO

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FL 32304