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FLORIDA LIMITED LIABILITY CO. CEMAGROUP, LLC

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May 21, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: CEMAGROUP, LLC

REF: W15000035992

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.

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.

Pleasecretural your document, along with a copy of this letter, within 60 days or your iling will be considered abandoned.

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

Jehna Haffis Regulatory Specialist II

FAX Aud. #: H15000122448 Letter Number: 715A00010722

15 MA SECRI

2015 MAY 20 AM 4: 3
SECRETARY OF STALL
ANASSES ELSAL

P.O BOX 6327 - Tallahassee, Florida 32314





ARTICLES OF ORGANIZATION FOR

CEMAGROUP, LLC A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

. The name of the Limited Liability Company is:

CEMAGROUP, ILC

ARTICLE II - ADDRESS:

The mailing address and street of the principal office of the Limited Liability Company is:

C/O: 1390 Brickell Avenue, Suite 200 Miami, Florida 33131

ARTICLE III - DURATION:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - MANAGEMENT:

The Limited Liability Company is to be managed by a manager, or managers until the first annual meeting of the members or until their names are elected and qualify and the name(s) and Address(es) of such manager(s) who is/are:

Noracio Cesar Mateo

C/O: 1390 Brickell Avenue, Suite 200

Mismi, Florida 33131

DAMIAN GARCIA

C/O: 1390 Brickell Avenue, Spite 200

Miami, Florida 33131

This Instrument Prepared By:

Alvaro Castillo B., Esq. 1390 Brickell Avenue, Suite 200 Miami, Florida 33131 (305) 371-5540 Florida Bar No. 611761 2015 MAY 20 AH 4: 32

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be by (i) unanimous resolution and consent of the remaining members under the same terms and conditions as set forth from time to time by the remaining members and by (ii) filing a supplemental affidavit of capital contributions with Department of State, State of Florida setting forth the actual contributions of all members.

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a membership of a member in the limited liability company shall be as set forth in a unanimous resolution and consent of the remaining members and in the event there are less than two members or in the event the remaining members do not reach a unanimous resolution with the determination of a membership of a member within 15 days from said termination, the limited liability company shall be dissolved.

The UNDERSIGNED Member or Authorized Representative, for the purpose of forming a Limited Liability Company to do business within the State of Florida, does make and file these Articles of Organization, hereby declaring and certifying that the facts stated are true.

Bv:

Damian Garcia, Manager

COCCURION OF SECTION

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CERTIFICATE OF DESIGNATION OF REGISTER AGENT/REGISTER OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0203026) FLORIDA STATUES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTER AGENT, THE STATE OF FLORIDA.

1. The name of the limited liability company is:

CEMAGROUP, LLC

2. The name and address of the registered agent and office is:

> ALVARO CASTILLO B., P.A. 1390 Brickell Avenue Suite 200 Miami, Florida 33131

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE THE THIS CERTIFICATE, I HEREBY ACCEPT PLACE DESIGNATED APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTER AGENT.

5.20.11

SIGNATURE

DATE