

MAR/22/2016/TUE 01:47 PM

FAX No.

P. 001

3/22/2016

Division of Corporations

# L16000056925

Florida Department of  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H16000072224 3)))



H160000722243ABCV

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000146  
Phone : (305)444-4994  
Fax Number : (305)444-4977

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

Email Address: \_\_\_\_\_

RECEIVED

16 MAR 22 PM 2:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.  
TORTUGA VENTURES, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

16 MAR 22 PM 2:30

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

MAR 23 2016

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

MAR/22/2016/TUE 01:47 PM

FAX No.

P. 002

16 MAR 22 PM 2:30

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLES OF ORGANIZATION FOR  
TORTUGA VENTURES, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**TORTUGA VENTURES, LLC**

**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:

<b>RAUL F. LACAYO</b>	<b>C/O: 1390 Brickell Avenue, Suite 200 Miami, Florida 33131</b>
<b>RODRIGO BARCENAS</b>	<b>C/O: 1390 Brickell Avenue, Suite 200 Miami, Florida 33131</b>
<b>MARIO RAPFACCIOLI</b>	<b>C/O: 1390 Brickell Avenue, Suite 200 Miami, Florida 33131</b>
<b>FRANCESCO MARZANO</b>	<b>C/O: 1390 Brickell Avenue, Suite 200 Miami, Florida 33131</b>

This Instrument Prepared By: **Alvaro Castillo B., Esq.  
1390 Brickell Avenue, Suite 200  
Miami, Florida 33131  
(305) 371-5540  
Florida Bar No. 611761**

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS:**

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.

By: \_\_\_\_\_

  
RAUL F. LACAYO, Manager

**CERTIFICATE OF DESIGNATION OF  
REGISTER AGENT/REGISTER OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0203 (1) (b), FLORIDA STATUTES, 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:

**TORTUGA VENTURES, 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 PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED 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 REGISTER AGENT.

  
SIGNATURE

3-21-16  
DATE