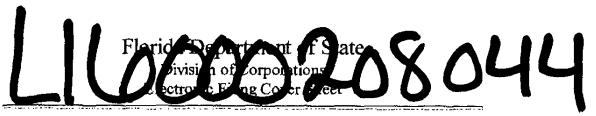
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LAZARUS

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(((H16000272182 3)))



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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552~5973

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FLORIDA LIMITED LIABILITY CO.

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Page Count	03
Estimated Charge	\$130.00

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11/3/2016 3:23 PM

ARTICLE I - Name:

The name of the Limited Liability Company is:

H16000272182

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Compass Properties L.L.C. [Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "L.C." or "L.C.,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 1445 SW 122 Avenue, Apt 7 Mlami, Florida 33184 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:

Valentin Lopez c/o Lopez & Partners, LLC

Name

Valentin Lopez c/o Lopez & Partners, LLC

2600 Douglas Road, Suite 811

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

Coral Gables

FL 33134

City, State, and 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 604 F.S.:

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

H16000272182

Member Esther Lika Rodriguez de Alvarez 1446 SW 122 Avenue, Apt 7 Miemi, Fiorida 33184 Use attachment if necessary) Let V: Effective date, if other than the date of filing: November 2, 2016 (OPTIONA ective date is listed, the date must be specific and cannot be more than five business day days after the date of filing.)	Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
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Miami, Florida 33184 Esther Lilia Rodriguez de Alvarez 1446 SW 122 Avenue, Apt 7 Miami, Florida 33184 Use attachment if necessary) LE V: Effective date, if other than the date of filing: November 2, 2016 (OPTIONA ective date is listed, the date must be specific and cannot be more than five business day days after the date of filing.)		
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(In accordance with section of this document constitutes in affirmation under the penalties of perjury that the facts stated herein are true.)	E V: Effective date, if other than ective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a me (In accordance with of this document of this document of the content of th	omber or an actionizan representative of a member.
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