

Division of Corporations

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Florida Department of State  
Division of Corporations  
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Division of Corporations  
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Phone : (305) 373-9410  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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FLORIDA LIMITED LIABILITY CO.

Falconview Properties, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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ALLAHASSEE, FLORIDA

17 APR -7 AM 9:09

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**ARTICLES OF ORGANIZATION  
OF  
FALCONVIEW PROPERTIES, LLC**

**ARTICLE I  
Name**

The name of the Limited Liability Company is **FALCONVIEW PROPERTIES, LLC** (the "Company").

**ARTICLE II  
Address**

The mailing address and street address of the principal office of the Company is located at 3764 NW 124th Avenue, Coral Springs, FL 33065.

**ARTICLE III  
Registered Agent**

The name of the Company's registered agent in the State of Florida is CT Corporation System and the address of the Company's registered office is 1200 South Pine Island Road, Plantation, FL 33324.

**ARTICLE IV  
Duration**

The period of duration for the Company shall be perpetual.

**ARTICLE V  
Management**

The Company is to be managed by its members. The name and address of the initial member is:

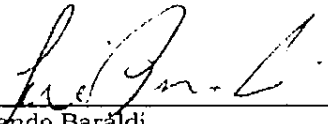
Maslujo E-buildings SAS de CV  
Calle Montecito 38  
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Colonia Napoles, Delegación Benito Juárez  
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**IN WITNESS WHEREOF**, the undersigned has executed these Articles of Organization of **FALCONVIEW PROPERTIES, LLC** this 7<sup>th</sup> day of April, 2017.

  
\_\_\_\_\_  
Luis Fernando Baraldi  
Authorized Representative

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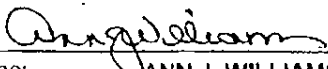
**CERTIFICATE OF DESIGNATION  
OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **FALCONVIEW PROPERTIES, LLC**
2. The name and address of the registered agent and office is: **CT Corporation System, 1200 South Pine Island Road, Plantation, FL 33324.**

*Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent.*

CT Corporation System

By:   
Name: ANN J. WILLIAMS  
Title: Assistant Vice President

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