

Division of Corporations

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : FOWLER WHITE BURNETT P.A.
Account Number : 071250001512
Phone : (305) 789-9200
Fax Number : (786) 437-4609

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

Email Address: esalcedo@fowler-white.com

**FLORIDA LIMITED LIABILITY CO.
Laubenabl Holdings LLC**

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| Certificate of Status | 0 |
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Audit No. H170003041403

**ARTICLES OF ORGANIZATION
OF
LAUBENABI HOLDINGS LLC**

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ARTICLE I

The name of the limited liability company formed hereby is LAUBENABI HOLDINGS LLC (the "Limited Liability Company").

ARTICLE II

The duration of the Limited Liability Company shall be perpetual.

ARTICLE III

The principal office and mailing address of the Limited Liability Company shall be as follows:

7422 FISHER ISLAND DRIVE
MIAMI, FLORIDA 33109

ARTICLE IV

The registered agent of the Limited Liability Company (the "Registered Agent") and its street address in the State of Florida are as follows:

FOWLER WHITE BURNETT, P.A.
1395 BRICKELL AVENUE, 14th FLOOR - GOA
MIAMI, FLORIDA 33131

ARTICLE V

The Limited Liability Company shall be *manager-managed*. The name and address of the initial manager (the "Manager") is as follows:

EDUARDO COHEN
7422 FISHER ISLAND DRIVE
MIAMI, FLORIDA 33109

ARTICLE VI

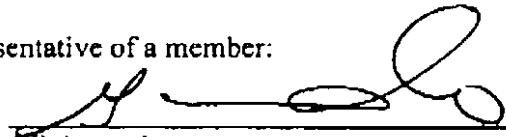
The effective date for this Limited Liability Company shall be:

November 17, 2017

Audit No. H170003041403

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Signature of member or an authorized representative of a member:

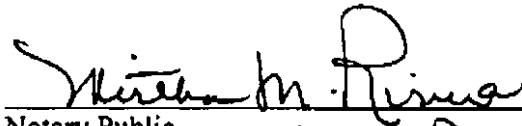


 Gil Acevedo,
 as Authorized Representative
 of the Member

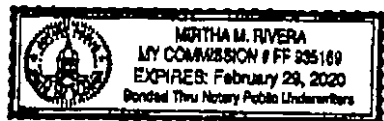
STATE OF FLORIDA)
)
 COUNTY OF MIAMI-DADE)

BEFORE ME personally appeared Gil Acevedo, as Authorized Representative of the Members, who is personally known to me, or who produced a Florida driver's license as identification, to be the person who executed the foregoing Articles of Organization.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal on November 17, 2017.



 Notary Public
 Print Name: Mertha M. Rivera
 My Commission expires: 2-29-2020



Audit No. H170003041403

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
AND ACCEPTANCE OF DESIGNATION

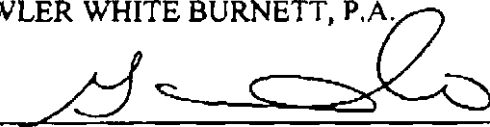
Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

1. The name of the limited liability company is LAUBENABI HOLDINGS LLC.
2. The name and address of the Registered Agent and Office is:

FOWLER WHITE BURNETT, P.A.
1395 BRICKELL AVENUE, 14th FLOOR - GOA
MIAMI, FLORIDA 33131

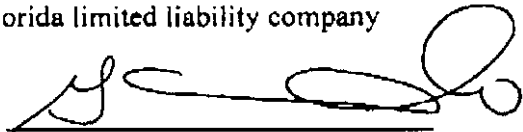
Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in the Certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all Statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as Registered Agent.

FOWLER WHITE BURNETT, P.A.

By: 
Gil O. Acevedo, Shareholder

Date: November 17, 2017

LAUBENABI HOLDINGS LLC,
a Florida limited liability company

By: 
Gil Acevedo,
as Authorized Representative
of the Member