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Florida Department of State
Division of Corporations
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Division of Corporations
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FLORIDA LIMITED LIABILITY CO.

EAGLES BAY International LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
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JAN 19 2018

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January 18, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EXPRESS CORPORATE FILING SERVICE

SUBJECT: EAGLES BAY CO LLC
REF: W18000005036

W/A

We have received your document for EAGLES BAY CO LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CO." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Carlos E Rico
Regulatory Specialist II

FAX Aud. #: H18000020377
Letter Number: 318A00001125

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Eagles Bay International LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:Mailing Address:C/O 8500 West Flagler Street
Suite B-208
Miami, FL 33144C/O 8500 West Flagler Street
Suite B-208
Miami, FL 33144

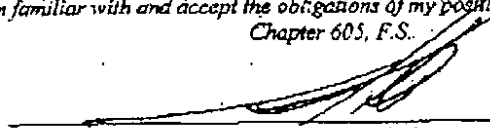
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

Bernardo C. Tacoronte, CPA
Name8500 West Flagler Street Suite B-208
Florida street address (P.O. Box NOT acceptable)Miami City FL 33144 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 605, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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18 JAN 22 PM 4:51
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR/MGRName and Address:Andres A. Noble8500 West Flagler Street, Suite B-208Miami, FL 33144MGRLuis Montoto8500 West Flagler Street, Suite B-208Miami, FL 33144

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.)

ANDRES. A. NOBLE

Typed or printed name of signee.