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To:

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

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
FOUR DIMENSION INVESTMENT, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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December 14, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CAPITOL SERVICES, INC.

SUBJECT: FOUR DIMENSION INVESTMENT, LLC
REF: W18000107722

***PLEASE PROVIDE THE ORIGINAL
SUBMISSION DATE OF 12/13/18.
THANK YOU!***

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return the corrected original and one copy of 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.

Terri J Schroeder
Regulatory Specialist III
New Filings

FAX Aud. #: H18000354216
Letter Number: 718A00025677

**CERTIFICATE OF FORMATION
OF
FOUR DIMENSION INVESTMENT, LLC**

The undersigned organizer of a Florida Limited Liability Company, hereby adopts the following Certificate of Formation for the limited liability company (the "Limited Liability Company"):

ARTICLE ONE

The name of the Company is

"FOUR DIMENSION INVESTMENT, LLC"

ARTICLE TWO

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

Principal Office Address: 2600 S. Douglas Rd. Suite 800 Coral Gables
Florida 33134

ARTICLE THREE

Registered Agent

The initial registered agent is an organization by the name of:
Think Finance, Inc

The street address of the initial registered office of the Company is:
2600 S. Douglas Rd. Suite 800 Coral Gables, Florida 33134

ARTICLE FOUR

Initial Managers

The name and address of the initial Managers of the Limited Liability Company are:

<u>Name</u>	<u>Address</u>
Rodrigo Ortega Salazar	2600 S. Douglas Rd. Suite 800 Coral Gables, FLA 33134
Rodrigo Velasco Hill	2600 S. Douglas Rd. Suite 800 Coral Gables, FLA 33134
Raúl Ortega Sansores	2600 S. Douglas Rd. Suite 800 Coral Gables, FLA 33134
Raúl Gerardo Ortega Salazar	2600 S. Douglas Rd. Suite 800 Coral Gables, FLA 33134

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ARTICLE FIVE

Organizer

The name and address of the organizer are:

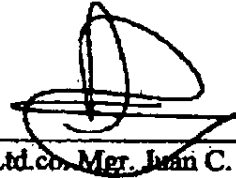
Name

Lawgistic, Ltd. Co

Address

800 Town & Country Blvd, St 300
Houston, Texas 77024

IN WITNESS WHEREOF, the undersigned has executed the Certificate of Formation
this 12th day of December, 2018.



Lawgistic Ltd.co, Mgr. Juan C. Luma, Organizer


Name and Signature of REGISTERED AGENT

Think Finance, Inc

2600 S. Douglas Rd. Suite 800 Coral Gables

Florida 33134

*I hereby am familiar with and accept the duties and responsibilities as registered agent for said
limited liability company.*


By: Mr. Roy Garcia
Date: December 12th 2018

This document becomes effective when the document is filed by the secretary of state

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