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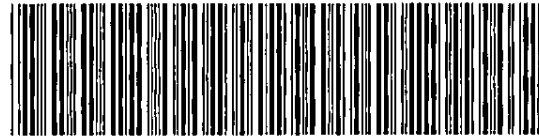
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**NAME: VERACITA LLC**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I      NAME**

The name of the Limited Liability Company is:

VERACITA LLC

**ARTICLE II      ADDRESS**

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

848 BRICKELL AVENUE, STE 200  
MIAMI, FLORIDA 33131

**ARTICLE III      REGISTERED AGENT**


The name and the Florida street address of the registered agent are:

BP TAX ADVISORY LLC  
848 BRICKELL AVENUE, STE 200  
MIAMI, FLORIDA 33131

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*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.*

X

  
\_\_\_\_\_  
BRUNO PEIXOTO Registered Agent's signature

**ARTICLE IV AUTHORIZED PERSON(S)**

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

AUTHORIZED MEMBER

VERACITA LTD.

201 CHURCH ST, SANDYPORT WEST BAY STREET

NASSAU, BAHAMAS

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X Violette S. Della Rosa

VIOLETTE SALLOUTI DELLA ROSA / Authorized Representative's signature

*(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.)*