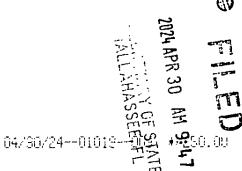
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

y Company is:				
nin the words "Limited	Liability Company	"I I C "or "I I C ")		
ini nie words. Emined	Elability Company,	L.L.C., Of D.C.		
ldress of the principal o	office of the Limited	Liability Company is:		
ıl Office Address:		Mailing Addr	r <u>ess</u> :	
765 Crandon Boulevard		765 Crandon Boulevard		
Apt PH7 Apt PH7				
Key Biscayne, FL 33149 Key Biscayne, FL 33149		Biscayne, FL 33149		
ctive Florida registration address of the registered CT Corporation Systems 1200 South Pine Isla Florida street address	on.) d agent are: stem Name and Road ss (P.O. Box NOT ac	cceptable)	IIVAGUAT OI	
	State			
I hereby accept the appovisions of all statutes r ligations of my position /s/Theresa Buck	pointment as registere relating to the proper as registered agent a Assistant Secretary	ed agent and agree to act and complete performance is provided for in Chapter	in this capacity. Repair (1907) in this capacity. Repair (1907	
	al Office Address: and 149 ant, Registered Office, cannot serve as its own ctive Florida registration address of the registered C T Corporation System 1200 South Pine Isla Florida street address Plantation City I gent and to accept serve I hereby accept the approvisions of all statutes religations of my position /s/Theresa Buck	ddress of the principal office of the Limited al Office Address: ard 765 of Apt 149 Key ant, Registered Office, & Registered Agent cannot serve as its own Registered Agent citive Florida registration.) address of the registered agent are: C T Corporation System Name 1200 South Pine Island Road Florida street address (P.O. Box NOT accept and to accept service of process for the I hereby accept the appointment as registered ovisions of all statutes relating to the proper ligations of my position as registered agent and Indicated as the Indicated Agent's Signature Registered Agent's Registered Agent's Registered Agent's Registered Agent's R	diress of the principal office of the Limited Liability Company is: al Office Address: Mailing Address Apt PH7 149 Apt PH7 Key Biscayne, FL 33149 and, Registered Office, & Registered Agent's Signature: cannot serve as its own Registered Agent. You must designate an inective Florida registration.) address of the registered agent are: CT Corporation System Name 1200 South Pine Island Road Florida street address (P.O. Box NOT acceptable) Plantation FL State Zip Igent and to accept service of process for the above stated limited liabil I hereby accept the appointment as registered agent and agree to act ovisions of all statutes relating to the proper and complete performance ligations of my position as registered agent as provided for in Chapter /s/Theresa Buck, Assistant Secretary Registered Agent's Signature (REQUIRED)	In the words "Limited Liability Company, "L.L.C.," or "LLC.") Iddress of the principal office of the Limited Liability Company is: Al Office Address: Mailing Address: Mailing Address: Mailing Address: Apt PH7 Key Biscayne, FL 33149 Int, Registered Office, & Registered Agent's Signature: cannot serve as its own Registered Agent. You must designate an individual or ctive Florida registration.) Address of the registered agent are: C T Corporation System Name 1200 South Pine Island Road Florida street address (P.O. Box NOT acceptable) Plantation FL 33324 City State Zip Igent and to accept service of process for the above stated limited liability company at the I hereby accept the appointment as registered agent and agree to act in this capacity. In the proper and complete performance of my duties, and I ligations of my position as registered agent as provided for in Chapter 605. Is Theresa Buck, Assistant Secretary Registered Agent's Signature (REQUIRED) Registered Agent's Signature (REQUIRED)

The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR Rodrigo Perez 765 Crandon Boulevard, PH7 Key Biscayne, FL 33149 (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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. (D) **REQUIRED SIGNATURE:** /s/Rodrigo Perez Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida: Statutes. 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.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

Rodrigo Perez