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DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

[illegible] COMPANY
[illegible]
SUITE 200
MIAMI FL 33135- 301-
CONTACT: RAY STORMONT
PHONE: (305) 541-3094
FAX: (305) 541-3770

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DOCUMENT TYPE: LIMITED LIABILITY COMPANY
NAME: MAGNA INVESTMENTS, L.C.
FAX AUDIT NUMBER: H95000003329
DATE REQUESTED: 03/22/1995
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NUM CAPS Connect: 00:05:4!

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ARTICLES OF ORGANIZATION
OF
MAGMA INVESTMENTS, L.C.
A FLORIDA LIMITED LIABILITY COMPANY

WE, the undersigned, for the purpose of forming a limited liability company for profit pursuant to the Florida Limited Liability Company Act, Chapter 608 of the Florida Statutes, do hereby make, subscribe, acknowledge and file the following Articles of Organization:

ARTICLE I
NAME

The name of this limited liability company shall be: MAGMA INVESTMENTS, L.C.

ARTICLE II
PRINCIPAL OFFICE

The mailing address and street address of the initial principal office of this limited liability company in the State of Florida are:

815 N. Red Road
Suite 400
Miami, Florida 33126

ARTICLE III
DURATION

This limited liability company shall have perpetual existence from the date of the filing of these Articles of Organization with the Florida Department of State, unless earlier terminated as allowed by law.

ARTICLE IV
POWERS

This limited liability company shall have the authority and power to engage in any activity or business permitted under the laws of the United States and of the law of the State of Florida, and the law of any other jurisdiction wherein it may conduct business. This limited liability company may conduct business within or without the State of Florida anywhere in the world that it may so select.

ARTICLE V
MANAGEMENT

This limited liability company is to be managed by one (1) manager initially, who shall be responsible for the management of

PREPARED BY:
Norman Leopold, Esquire
LEOPOLD & LEOPOLD, P.A.
20601 Biscayne Blvd., #501
Aventura, FL 33180
Florida Bar No. 163308

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NORMAN LEOPOLD, ESQ.
20601 BISCAYNE BLVD. #501
AVENTURA, FL 33180
FL. BAR NO. 163308
(305) 935.3500

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this limited liability company. The members may, from time to time and at any time, raise or lower the number of managers of this limited liability company by so providing by written agreement of the members holding one hundred percent (100%) ownership interests in this limited liability company. The initial manager and his street address are as follows:

NAME	ADDRESS
Louis O. Gonzalez	015 N. 2nd Road Suite 400 Miami, Florida 33126

ARTICLE VI
ADDITIONAL MEMBERS

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be: new members may be admitted from time to time, and upon such terms and conditions, as shall be determined by a unanimous vote of the Members.

ARTICLE VII
MEMBERS' RIGHT TO CONTINUE BUSINESS

The remaining members of this limited liability company shall have the right to continue the business upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of any other member of this limited liability company, or upon the occurrence of any other event which would terminate the continued membership of a member in this limited liability company.

We, the undersigned, being the initial subscribers and members of these Articles of Organization for the purpose of forming a limited liability company pursuant to Chapter 608 of the Florida Statutes, to do business both within and without the State of Florida, do make, subscribe, acknowledge and file these Articles of Organization, hereby declaring and certifying that the articles herein stated are true and accordingly, hereunto set our hands and seals this 17th day of March, 1995.

ELIZABETH PROPERTIES, INC., a Florida corporation

By: [signature]
Name: Louis O. Gonzalez
Title: President

[signature]
Louis O. Gonzalez

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STATE OF FLORIDA
COUNTY OF DADE

The foregoing instrument was acknowledged before me this 17 day of March, 1995, by LOUIS O. GONZALES as President of ELIZABETH PROPERTIES, INC., a Florida corporation, on behalf of the corporation, who is personally known to me or produced ______ as identification.

Notary Public, State of Florida
Gisela De Jesus
Print name of notary public

My commission expires:

GISELA DE JESUS
MY COMMISSION # CC 335078
EXPIRES: December 26, 1997
Bonded Thru Notary Public Underwriters

STATE OF FLORIDA
COUNTY OF DADE

The foregoing instrument was acknowledged before me this 17 day of March, 1995, by Louis O. Gonzalez, who is personally known to me or who produced ______ as identification.

Notary Public, State of Florida
Gisela De Jesus
Print name of notary public

My commission expires:

GISELA DE JESUS
MY COMMISSION # CC 335078
EXPIRES: December 26, 1997
Bonded Thru Notary Public Underwriters

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CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: MAGMA INVESTMENTS, L.C.

2. The name and address of the registered agent and office is:

Leslie Gonzalez Smith
815 N. Red Road
Suite 400
Miami, Florida 33126

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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Leslie Gonzalez Smith

Date: March 17, 1995

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

THE UNDERSIGNED member or authorized representative of a Member of MAGNA INVESTMENTS, L.C. deposes and says:

1. The above named limited liability company has at least two (2) members.

2. The total amount of cash contributed by both members is $ 50,000.00 .

3. If any, the agreed value of property other than cash contributed by the members is $ - 0 - . A description of the property is attached hereto and made a part hereof.

4. The total amount of cash or property anticipated to be contributed by members is $ 50,000.00 This total includes amounts from 2 and 3 Above.

LOUIS O. GONZALEZ

STATE OF FLORIDA
COUNTY OF DADE

The foregoing instrument was acknowledged before me this 17 day of March, 1995, by LOUIS O. GONZALEZ, who is personally known to me or who produced ______________________ as identification.

Notary Public, State of Florida

Gisela De Jesus

Print name of notary public

My commission expires:

GISELA DE JESUS
MY COMMISSION # CC 352078
EXPIRES: December 20, 1997
Bonded Thru Notary Public Underwriters

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

THE UNDERSIGNED member or authorized representative of a member of MAGNA INVESTMENTS, L.C. deposes and says:

1. The above named limited liability company has at least two (2) members.

2. The total amount of cash contributed by both members is $ 50,000.00 .

3. If any, the agreed value of property other than cash contributed by the members is $ - 0 - . A description of the property is attached hereto and made a part hereof.

4. The total amount of cash or property anticipated to be contributed by members is $ 50,000.00 . This total includes amounts from 2 and 3 above.

ELIZABETH PROPERTIES, INC., a Florida corporation

By: [signature]
Name: Louis O. Gonzalez
Title: President

STATE OF FLORIDA
COUNTY OF DADE

The foregoing instrument was acknowledged before me this 17 day of March, 1995, by LOUIS O. GONZALEZ as President of ELIZABETH PROPERTIES, INC., a Florida corporation, on behalf of the corporation, who is personally known to me or produced ______________ as identification.

[signature]
Notary Public, State of Florida
Gisela De Jesus
Print name of notary public

My commission expires:

GISELA DE JESUS
MY COMMISSION # CC 332070
EXPIRES: December 28, 1997
Bonded Thru Notary Public Underwriters

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FILE NOW: Fee after May 1, will be $263.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILING FEE $ 238.75 — Annual Report $100.00 + $138.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company — **DOCUMENT #L95000000229**

MAGNA INVESTMENTS, L.C.
815 NORTH RED ROAD
SUITE 400
MIAMI FL 33126

1a. Principal Place of Business Address
815 NORTH RED ROAD
SUITE 400
MIAMI FL 33126

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

2. Principal Place of Business	2a. Mailing Address
Suite, Apt #, etc	Suite, Apt #, etc
City & State	City & State
Zip / Country	Zip / Country

3. Date Organized or Qualified: 03/23/1995
3a. State of Formation: FL
4. FEI Number: 65-0574495 ☐ Applied For ☐ Not Applicable
5. Date of Last Report
6. Certificate of Status Desired — $8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

SMITH, LESLIE G
815 NORTH RED ROAD
SUITE 400
MIAMI FL 33126

8. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt. #, etc
City FL Zip Code

700001-0-751-7
-06/24/96--01033--008
****263.75 ****263.75

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations

SIGNATURE ______ DATE ______
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	GONZALEZ, LOUIS O	815 NORTH RED RD. SUITE 40	MIAMI FL

a.a. 6-17-96

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address

SIGNATURE: [signature] 2/2/96 305-262-6100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #

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FILE NOW: Fee after May 1, will be $588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 JAN 29 AM 8:33

FILING FEE $ 203.75 — Annual Report $100.00 + $103.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company — **DOCUMENT #** L95000000229

MAGNA INVESTMENTS, L.C.
815 NORTH RED ROAD
SUITE 400
MIAMI FL 33126

1a. Principal Place of Business Address
815 NORTH RED ROAD
SUITE 400
MIAMI FL 33126

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

2. Principal Place of Business	2a. Mailing Address
Suite, Apt #, etc	Suite, Apt #, etc
City & State	City & State
Zip / Country	Zip / Country

3. Date Organized or Qualified: 03/23/1995
3a. State of Formation: FL
4. FEI Number: 65-0574485 — ☐ Applied For ☐ Not Applicable
5. Date of Last Report: 06/17/1996
6. Certificate of Status Desired — $8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

SMITH, LESLIE G
815 NORTH RED ROAD
SUITE 400
MIAMI FL 33126

8. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt. #, etc.
City — FL — Zip Code

9. Pursuant to the provisions of Sections 608.410 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE ______________________ DATE ____________
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	GONZALEZ, LOUIS O	815 NORTH RED RD. SUITE 40	MIAMI FL

800002073988--6
-01/30/97--01076--001
****203.75 ****203.75

1/27/97

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #

INHSE10 R(12-96)

MAGNA INVESTMENTS, L.C.
815 N. RED ROAD, SUITE 400, MIAMI, FL 33126
TELEPHONE (305) 262-6100 FAX (305) 262-5350

L95000000229

August 4, 1997

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Ma'am:

This morning, I noticed on your internet site that Magna Investments, L.C. has the wrong FEI Number on your records. The number it is listed under (65-0574485) is the correct number for Brighton Realty, Inc., which is a related company. The correct number for Magna Investments, L.C. is 65-0569486. Please make the correction for us and send me notification that the correction was made.

Thank you!

Sincerely,

Charles J. Mensch

FEI ONLY

KS 8/6