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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone Fax Number

(305)541-3694 : (305)541-3770

LIMITED LIABILITY COMPANY

Figlish tennslation: The Hacienda

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Certificate of Certified Cor Page Count Estimated Charge

1 of 2

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 4, 1999

EMPIRE CORPORATE KIT COMPANY

SUBJECT: LA HACIENDA, LLC

REF: W99000013049

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Michelle Hodges Document Specialist FAX Aud. #: H99000013462 Letter Number: 999A00030519

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Some of the British Company of

ARTICLE I - Name:

The name of the Limited Liability Company is:

La Hacienda (USA), LLC

ARTICLE II - Address:

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

520 Brickell Key Drive, 0-305 Miami, Florida 33131

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Nadezda Gaysina 520 Brickell Key Dr., 0-305 Miami, Florida 33131

SEGRETARY OF STATE DIVISION OF CORPORATIONS

99 JUN -7 AM IO: 53

Instrument Prepared By: STEPHEN A. FREEMAN. ESQ. FREEMAN. BUTTERMAN. HABER & ROJAS, LLP 520 Brickell Key Dr., 0-305 Miami, Florida 33131 Fla. Bar No. 146795 (205) 374-3800

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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.

- The name of the limited liability company is:
 La Hacienda (USA), LLC
- 2. The name and address of the registered agent and office is:

Staphen A. Freeman 520 Brickell Key Drive, 0-305 Miamî, Florida 33131

(SIGNATURE)

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.

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of deposes and says:

| 1) | the above named limited liability company has member; | at lea | st one |
|----|---|-----------------------|----------|
| 2} | the total amount of cash contributed by the member is | \$).60 | ,000.00 |
| 3) | if any, the agreed value of property other than cash contributed by member is | \$ | 0 |
| 4) | the amount of cash or property anticipated to be contributed by member is | \$ | <u> </u> |
| 5) | the total amounts of 2,3 and 4 is | \$1 60 | ,000.00 |

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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