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ACCOUNT NO. : 072100000032

REFERENCE : 486402 92490A

AUTHORIZATION :

*Patricia Papp*

COST LIMIT : \$ 125

ORDER DATE : November 18, 1999

ORDER TIME : 10:44 AM

ORDER NO. : 486402-005

CUSTOMER NO: 92490A

400003048584--7

CUSTOMER: Ms. Paola Febres  
VAZQUEZ & HESS LLP  
VAZQUEZ & HESS LLP  
Suite 802  
601 Brickell Key Drive  
Miami, FL 33131

DOMESTIC FILING

NAME: INFOVISAS.COM, LLC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christine Lillich

EXAMINER'S INITIALS:

SECRETARIAT OF STATE  
TALLAHASSEE FLORIDA

99 NOV 18 PM 12:29

FILED

DEPARTMENT OF STATE  
DIVISION OF CORPORATE AFFAIRS  
TALLAHASSEE FLORIDA

99 NOV 18 AM 11:37

RECEIVED

ARTICLES OF ORGANIZATION OF INFOVISAS. COM, LLC  
LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — Name:**

The name of the Limited Liability Company is: **INFOVISAS. COM, LLC**

**ARTICLE II — Address:**

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

601 Brickell Key Drive, Ste. 802, Miami, FL 33131

**ARTICLE III — Duration:**

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

**ARTICLE IV — Management:**  
(Check the appropriate box and complete the statement)

- ☐ 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:
- ☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member is:

Luis Alfredo Baena, MGRM  
601 Brickell Key Drive, Suite 802  
Miami, Florida 33131

Carlos Campos, MGRM  
601 Brickell Key Drive, Suite 802  
Miami, Florida 33131

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**ARTICLE V — Admission of Additional Members:**

The right of the members to admit additional members and the terms and conditions of the admissions shall be by unanimous consent of the Members.

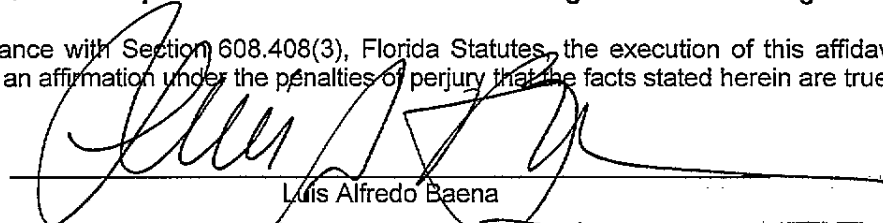
**ARTICLE VI — Members' Rights to Continue Business**


The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be determined by the votes of the majority of the members as of the date of specified event (as described herein).

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this \_\_\_\_\_ day of \_\_\_\_\_. [This is the author's recommended addition to the Department of State Guideline.]

**Signature of an authorized representative of a member executing the Articles of Organization.**

(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.)

  
Luis Alfredo Baena

  
Carlos Campos

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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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

**INFOVISAS.COM, LLC**

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

**Gerardo A. Vazquez, Esquire**  
(Name)

**601 Brickell Key Drive, Suite 802**  
Florida street address (P.O. Box **NOT** acceptable)

**Miami, Florida 33131**  
City/State/Zip

*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.*

  
\_\_\_\_\_  
(Signature)

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