

L10000050035

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000113378 3))



H100001133783ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : BERRIZ & GIRALDO P.A.
Account Number : 119990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098

SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY 10 AM 7:57

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED
10 MAY 10 PM 15:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
EBP TRADE, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

T. HAMPTON

MAY 11 2010

EXAMINER

H/ 0000 1133783

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

EBP TRADE, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

EBP TRADE, LLC.

ARTICLE II - ADDRESS

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

**888 SOUTH DOUGLAS RD # 902
CORAL GABLES, FL. 33134**

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

EDUARDO ALBERTO SILVA ASTORGA

888 SOUTH DOUGLAS RD # 902
Florida street address (P.O.BOX NOT acceptable)

CORAL GABLES, FL. 33134
City, State, and Zip

**CLARA GIRALDO P.A.
4080 SW 84 AVE SUITE C
MIAMI, FL 33155
(305) 485-9300**

H/ 0000 1133783

**SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 May 10 AM 7:47**

H/ 0000 1133783.

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 608, F.S..

REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

EDUARDO ALBERTO SILVA ASTORGA
888 SOUTH DOUGLAS RD # 902
CORAL GABLES, FL. 33134

MANAGER

ALESSANDRO GIORDANI
888 SOUTH DOUGLAS RD # 902
CORAL GABLES, FL. 33134

MANAGER

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

EDUARDO ALBERTO SILVA ASTORGA

Typed or printed name of signee

H/ 0000 1133783.

SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY 10 AM 7:57