Page 1 of 2

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:

: GUTTENMACHER & BOHATCH, P.A. Account Name

Account Number: 119990000159 Phone : (305)442-4911 Fax Number : (305)442-0911



LIMITED LIABILITY COMPANY

LATAM@WORK, LLC

Certificate of Status	
Certified Copy	1 1
Page Count	03
Estimated Charge	\$155.00



Audit No. H01000006808

Articles of Organization for LATAM@WORK, L.L.C. a Florida Limited Liability Company

OI JAN 16 PH 5: 00

The undersigned, desiring to form a limited liability company under and pursuant to Florida Statute 608 entitled the Florida Limited Liability Company Act, do hereby adopt the following Articles of Organization for such company:

ARTICLE I.

Name. The name of this Limited Liability Company is: LATAM@WORK, L.L.C.

ARTICLE II.

Address. The mailing and street address is 2600 Douglas Road, Suite 902, Coral Gables, Florida 33134.

ARTICLE III.

Registered Agent and Office. The name and street address of the initial registered agent and office for this company is as follows:

CARL B. WESTON, ESQ. 2600 DOUGLAS ROAD, PENTHOUSE 8 CORAL GABLES, FLORIDA 33134

Having been named as Registered Agent and to accept service of process for the above stated limited liability company, 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..

CARL B. WESTON, Registered Agent

Audit No. H01000006808 This Instrument Prepared by: Carl B. Weston, Esq. Guttenmacher & Bohatch, P.A. 2600 Douglas Road PH8 Coral Gables, Florida 33134 (305) 442-4911 Audit No. H0100006808

ARTICLE IV.

Management of Company. The company is to be managed by one manager. The name and address of the manager who is to serve until the first annual meeting of Members or until their successors are elected and qualify:

Name

Address

MANUEL PAULO MAXIMO SCHIAPPA PIETRA

2600 DOUGLAS ROAD, SUITE 902 CORAL GABLES, FLORIDA 33134

Signature of a member or an authorized representative of a member

CARL B. WESTON
(type or print name of signee)

OI JAN 16 PH 5: 00

Audit No. H01000006808

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 REGISTERD OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the Limited Liability Company is: LATAM@WORK, L.L.C..
- 2. The name and the Florida street address of the registered agent and office are:

CARL B. WESTON 2600 DOUGLAS ROAD, PH8 CORAL GABLES, FLORIDA 33134

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 company 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 in Chapter 608F.S.

CARL B. WESTON, Registered Agent

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