# 0200002 lttps://ss1.6s Division of

### Florida Department of State

**Division of Corporations** Public Access System

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(((H02000190804 3)))

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To:

Division of Corporations

Fax Number : {850}205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839

: (305)716-0346 Fax Number

## LIMITED LIABILITY COMPANY COSTALIN L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY C

#### ARTICLE I Name:

the name of the Limited Liability Company is:

COSTALIN L.L.C.

ARTICLE II - Address:

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

2717 Ponce de Leon Boulevard 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:

Sergio de Varona, CPA
Name
304 Palermo Avenue
Florida Street Address
Coral Gables, FL 33134
City, State, and 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 herby 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 in Chapter 508, F.5.

Registered Agent's Signature

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ARTICLE IV — Management (Check if applicable)  The Limited Liability Company is to be managed by one manager or more managers and is.		
therefore, a manager – managed company.	8	
(An additional article must be added if an effective date is requested)	SEP	7
Signature of a member of an authorized representative of a member of	-t-	
(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)	<b>≆</b> Ω	<u>_</u>
	<b>42</b>	
Mauro Scattolini Typed or printed name of signee		

MEMBERS	<u>=:</u>		<u>ADDRESS</u>
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Mauro Scattolini 2717 Ponce de Leon Blvd. Coral Gables, FL 33134

Constanza L. Profeta de Scattolini 2717 Ponce de Leon Blvd. Coral Gables, FL 33134