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Florida Department of State
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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : FILINGS, INC.
Account Number : 07270000101
Phone : (850)385-6735
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RECEIVED
04 FEB 12 AM 8:10
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

EDITIONES MULTIMEDIALES LATINAMERICANAS LTD. CO.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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P. 2

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

EDITIONES MULTIMEDIALES LATINAMERICANAS LTD. CO.

ARTICLE II - Address:

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

Principal Office Address:

414 BRICKELL AVE., SUITE 51-991

MIAMI, FLORIDA 33131

Mailing Address:

700 E. DANIA BEACH BLVD., SUITE 202

DANIA, FLORIDA 33004

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

BARTHE & LEIGH LLP

Name

2455 E. SUNRISE BLVD., SUITE 802

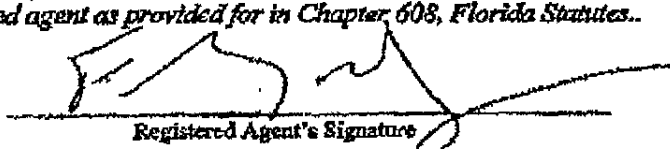
Florida street address (P.O. Box NOT acceptable)

FORT LAUDERDALE

FLORIDA 33304

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 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, Florida Statutes..


Registered Agent's Signature

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P. 3

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

EDITORIAL MANAGER CORP.

444 BRICKELL AVE., SUITE

MIAMI, FL 33131

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member of 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.)

FREDERIC M. BARTHE, ESQ.

Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 35.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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SECRETARY
TALLAHASSEE, FL