

W05000019147

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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
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LIMITED LIABILITY COMPANY

insualaca international group, llc

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
INSUALCA INTERNATIONAL GROUP, LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is:
INSUALCA INTERNATIONAL GROUP, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: *c/o Arvesu & Associates, PLLC, 201 Alhambra Circle, Suite 502, Coral Gables, FL 33134.*

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

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

Arvesu & Associates, PLLC
Name
201 Alhambra Circle, Suite 502
Florida street address (P.O. Box **NOT** acceptable)
Coral Gables, Florida 33034
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, F.S.

ARTICLE IV - Management (Check box if applicable.)

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

- Orlando Augusto Suarez Alvarez,
- Maria Eugenia Ramirez De Suarez
- Orlando Javier Suarez Ramirez
- Maria Waleswka Suarez Ramirez
- Carlos E. Carratu

[Signature]
Registered Agent's Signature

[Signature]
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes and affirmation under the penalties of perjury that the facts stated herein are true.)

Manuel M. Arvesu, Authorized Representative

Typed or printed name of signee

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