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To:

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

From:

Account Name : BERRIZ & GIRALDO P.A.  
Account Number : I19990000017  
Phone : (305) 485-9300  
Fax Number : (305) 485-1098

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

AMERICAN TRADE SOLUTIONS, LLC.

Certificate of Status	1
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EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
OF

**AMERICAN TRADE SOLUTIONS, LLC.**

ARTICLE I - NAME

The name of the Limited Liability Company is:

**AMERICAN TRADE SOLUTIONS, LLC.**

ARTICLE II - ADDRESS

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

6020 NW 99 AVE UNIT 205  
DORAL, FL 33178

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

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

ALEJANDRO BLANCHARD

6020 NW 99 AVE UNIT 205

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

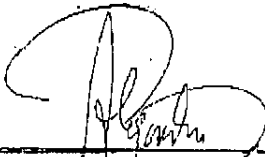
DORAL, FL 33178  
City, State, and Zip

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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 managers and is, therefore, a manager - managed company.

**ALEJANDRO BLANCHARD**  
6020 NW 99 AVE UNIT 205  
DORAL, FL 33178

**MANAGER**

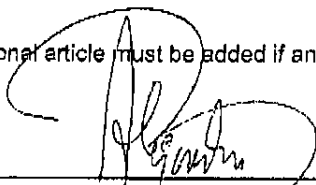
**LEONEL CALDERA**  
6020 NW 99 AVE UNIT 205  
DORAL, FL 33178

**MANAGER**

**JAIRO QUINONES**  
6020 NW 99 AVE UNIT 205  
DORAL, FL 33178

**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.)

**ALEJANDRO BLANCHARD**

Typed or printed name of signee

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

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