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PICK-UP WAIT MAIL

(Business Entity Name)

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TALLAHASSEE, FLORIDA

MAR 17 2010

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: COLAMERICAN GROUP L.L.C.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LEYDER H. SALAMANCA y/o ELIZABETH GUATAQUIRA

Name of Person

COLAMERICAN GROUP L.L.C.

Firm/Company

5743 RYWOOD DRIVE

Address

ORLANDO, FLORIDA 32810

City/State and Zip Code

elizabethguataquira@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leyder Salamanca y/o Elizabeth Guataquira

Name of Person

at (407) 921-7150/51

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 9, 2010

LEYDER H. SALAMANCA
5743 RYWOOD DRIVE
ORLANDO, FL 32810

SUBJECT: COLAMERICAN GROUP L.L.C.
Ref. Number: W10000011868

We have received your document for COLAMERICAN GROUP L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only 1 person can serv as the Registered Agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 810A00005830

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

COLAMERICAN GROUP L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

5743 RYWOOD DRIVE
ORLANDO FLORIDA 32810

5743 RYWOOD DRIVE
ORLANDO FLORIDA 32810

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Elizabeth Guataquira
Name

5743 RYWOOD DRIVE
Florida street address (P.O. Box **NOT** acceptable)

ORLANDO FL 32810
City, State, and Zip

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TALLAHASSEE, FLORIDA

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..

Elizabeth Guataquira
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

Manager

LEYDER SALAMANCA
5743 RYWOOD DRIVE
ORLANDO FLORIDA 32810

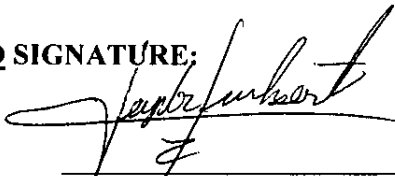
Managing Member

ELIZABETH GUATAQUIRA
5743 RYWOOD DRIVE
ORLANDO FLORIDA 32810

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED 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 document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Leyder H. Salamanca

Typed or printed name of signee

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10 MAR 17 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)