Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Fax Number : (305)633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO.

ria fd intl., llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Corporate Filing Menu T. HAMBITON

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EMPIRE CORP KIT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I		and day	
i de hame of	the Limited Liability Compar	1y 1s.	
RIA FD Inti	., LLC		
	(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC")	
ARTICLE I	i - Address:		
		the principal office of the Limited Liability Compa	ny is:
Principal Of	fice Address:	Mailing Address:	
10295 Collins Av	enue	10295 Collino Avenue	
Jnit 1102		Unit 1102	
Bai Harbour, Flo	ida 33154	Bal Harbour, Florida 33154	
The Limited Link business entity w	ility Company cannot serve as its own ith an active Florida registration.)	tered Office, & Registered Agent's Signature: Registered Agent. You must designed an individual or another	10 JUL 21
The name and	i the Florida street address of	the registered agent are:	
	Thomas J. Palmieri, B	isq	№.
		Varne	0
•	340 Minorca Ave., Si	uite One	至.

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

Coral Gables, FL 33134 FL
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.

Registered Agent's Phylature (REQUIRED)

(CONTINUED)
Page 1 of 2

H10000171305

SECRETARY OF STATE DIVISION OF CORPORATION

PAGE 02/03

EMPIRE CORP KIT

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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: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGRM** Ivans Kuznecova 10296 Callins Avenue, Unit 1102 Bal Harbour, Plorida 33154 MGRM Michael Karol 9 Mezhkaina Str. Riga, LV-1058, Latvia, EU Riga Aeronautical Institute, a Latvian Joint Stock Company MGRM 9 Mezhkaina Str. Riga, LV-1056, Latvia, EU (Use attachment if necessary) ARTYCLE V: Effective date, if other than the date of filing n/a (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: a member of an authorized representative of a member. (In accordance with section 608.408(3), Florida Scatutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Thomas J. Palmieri, Esq. Typed or printed name of signoc Filing Pecs: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Page 2 of 2

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