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SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. CLINE

SEP 15 2010

EXAMINER

COVER LETTER

	on Section f Corporations		
SUBJECT: AL	ex Silva Rua Name of Limi	s Brazilian (in-gitsu LLC
The enclosed Articl	es of Organization and fee(s) are	submitted for filing.	
Please return ail cor	respondence concerning this ma	tter to the following:	
	Alex Das	Name of Person	
Alex	Silva Ruas	Brazilian g	in-gitsu LLC
Married and the second of the	513 00	by Street	7.0 8
	Pensau	ola Florida ity/State and Zip Code	32534 FEB 7
- 1111 112 112 11	. Ci	ity/State and Zip Code Sbill A 1000 (for future including transfer future including transfer for future including transfer f	32534 EFF P
For further information	tion concerning this matter, pleas	se call:	Som EFLORID
Alex S	ilva Ruas ame of Person	at (850) 3110 Area Code & Daytime Tel	ephone Number
Enclosed is a chec	k for the following amount:		
□\$ 125.00 Filing Fo	ce S130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Address	1

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Alex Silva Ruas Brazilia (Must end with the words "Limited Liability Cor	mpany, "E.L.C.," or "ISEC.")
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:
Principal Office Address: Ma	iling Address:
513 Orby Street 5 Pensacola, PL 32534	13 orby Street PM = T
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own Registered A business entity with an active Florida registration.)	
The name and the Florida street address of the registe	ered agent are:
Alex Dasilva I	2uas
	<u>+ree+</u> P.O. Box <u>NOT</u> acceptable)
Pensacola FL City, State, and	<u> 32,534</u> d Zip
Having been named as registered agent and to accep	t service of process for the above stated limited

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

liability company at the place designated in this certificate, I hereby accept the appointment as

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

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

	≟ R" = Manager RM" = Managing Member	Name and Address:	
	212R	AlexaSilva Ruas 513 Orby Street Pensacola IFL 32534	
	, , , , , , , , , , , , , , , , , , , 		
<u></u>	······	SECRETA:	2010 SEP 11
(Use	attachment if necessary)	SEE TLORIO	MH: 25
(If an effecti	7: Effective date, if other the ve date is listed, the date make after the date of filing.)	an the date of filing: (OPTION ust be specific and cannot be more than five business dates	•
REC	DUIRED SIGNATURE:		
,	(In accordance v of this documen that the facts sta	vith section 608.408(3), Florida Statutes, the execution to constitutes an affirmation under the penalties of perjury sted herein are true.) Example 2	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certifled Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)