Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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L. SELLERS

To:

Division of Corporations

Fax Number : (850) 617-6383

DEC -7 2010

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone : (305)552-5973

Fax Number : (305)220~1440

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. LANDBRIDGE INTERNATIONAL TRADING, LLC

Certificate of Status

1

Certified Copy

03

Page Count

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Estimated Charge

\$130.00

9 A DEC -6 AM IO: 27

Electronic Filing Menu

Corporate Filing Menu

Help

H 1 0 0 0 0	12014/4
ARTICLES OF ORGANIZATION FOR FI	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	·
LAND BRIDGE IN (Musst end with the words "Limited Liabi	ITERNATIONAL Tradit
ARTICLE II - Address: The mailing address and street address of the property o	L. rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
19610 NE 26 AVE Miami FL 33180	19610 NE 26 AVE MIAMI FL 33180
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	l Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another
The name and the Florida street address of the	
Maria Rej	ane Shemesh
19610 NE	26 AVE
Florida street ad	dress (P.O. Box NOT acceptable)
Miami City, St	FL 3318 0
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacit	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of alterformance of my duties, and I am familiar with and
accept the obligations of my position as reg	istered agent as provided for In Chapter 608, F.S
Registered Agent's Signature	Shemal ASS TO
	AREA AH
(CONTIN	TUED)
Page 1 of	AMID: 2

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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:

"MGR" = Manager "MGRM" = Managing Member	Δ
MGRM	Jose Renato Loureiro De Aln RUA # Celso Calmon Nº 309 # PRAIA DO CANTO VITORIA ES BR
MGRM	FRANCISCO A. SCARDUZGOS 19610 NE 26 AVE Miami FL 33180.
(Use attachment if necessary)	
LE V: Effective date, if other than Yective date is listed, the date mus days after the date of filing.)	the date of filing:

REOUTRED SIGNATURE:

Sightere of a stember of an authorized tepresentative of a newsber

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

FRANCISCO A. SCARDUA.

Typed or printed name of signee

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)

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