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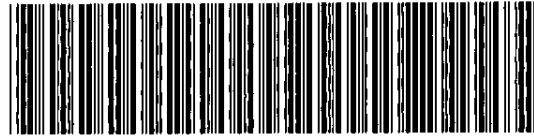
(Business Entity Name)

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11 MAY -4 AM 11:20
DEPT. OF STATE
DIVISION OF CORPORATIONS
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B. KOHR

MAY - 4 2011

EXAMINER

FILED
11 MAY -4 PM 3:01
SECRETARY OF STATE
DIVISION OF CORPORATIONS

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
11 MAY -4 PM 3:01

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. TRADE-LINK WEST INDIES,
(Corporation Name) (Document #)
2. L.L.C.
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2:00 ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not-for Profit
☒ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
TRADE-LINK WEST INDIES, L.L.C.**

FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS
11 MAY -4 PM 3:01

The undersigned, as a member or an authorized representative of a member of the Company pursuant to Chapter 608, Florida Statutes, files the following Articles of Organization establishing a Florida Limited Liability Company named: TRADE-LINK WEST INDIES, L.L.C.

ARTICLE I.

NAME

The name of the Limited Liability Company shall be
TRADE-LINK WEST INDIES, L.L.C.

ARTICLE II.

ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company shall be 10760 NW 123 STREET, MEDLEY, FL. 33178.

ARTICLE III.

DURATION

The period of duration for the Limited Company shall be perpetual.

ARTICLE IV.

PURPOSE OF ORGANIZATION

The Limited Liability Company is organized for the purpose of engaging in any and all other acts or purposes permitted under Section 608.404 of the Florida Statutes 1993, as amended from time to time, and for any and all other applicable or governing laws of the State Of Florida, except as any of the foregoing acts and/or purposes may be otherwise barred or restricted by laws.

ARTICLE V.

MANAGEMENT

This Limited Liability Company shall be managed by three Managing Member and the name and address of the Managing Member are:

JOHNO GOLDING 45%

at P.O. Box 90280, SAN JOSE, CA. 95109.

ISRAEL FELLIG 30%

at 4386 PINE TREE DR., MIAMI BEACH, FL. 33140.

JUAN A. ZILBERVARG 25%

at 3752 NE 208 TERR., AVENTURA, FL. 33180.

ARTICLE VI.
ADMISSION OF NEW MEMBERS

Unless otherwise herein specified, no new Members shall be admitted to the Limited Liability Company during the period of its existence. New Members may be admitted pursuant to a vote of not less than 100% of the total existing ownership interest each Member has in the Limited Liability Company. No individual Member and/or managing Member of the Limited Liability Company shall ever have the power to terminate or grant membership to any person.

ARTICLE VII.
CONTINUATION AFTER INVOLUNTARY TERMINATION

In the event of termination of the Limited Company due to death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or any other event which involuntarily terminates the Limited Liability Company, then in that event, the remaining and/or surviving Members shall be fully entitled to continue the business of the Limited Liability Company provided that 100% of the ownership interest then remaining shall have to do so in writing.


JUAN A. ZILBERVARG
MANAGING MEMBER

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the Limited Liability Company is:

TRADE-LINK WEST INDIES, L.L.C.
10760 NW 123 STREET
MEDLEY, FL. 33178

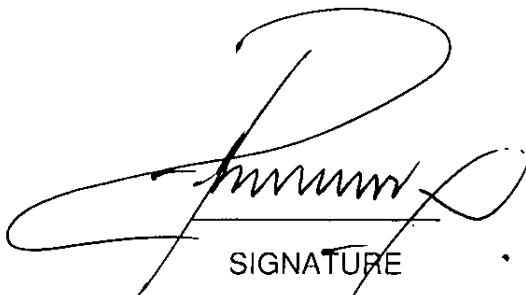
2. The name and address of the registered agent and office is:

JUAN A. ZILBERVARG
Name

10760 NW 123 STREET
(P.O. Box or Mail Drop NOT acceptable)

MEDLEY, FL. 33178
(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation 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.


SIGNATURE

JUAN A. ZILBERVARG

DATE 05/02/2011