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Florida Department of State
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To: Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
TRADE INSURANCE GROUP, LLC

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EXAMINER

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

TRADE INSURANCE GROUP, LLC

ARTICLE II ADDRESS

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

214 ST 4T29 COLINAS DE FAIR VIEW
TRUJILLO ALTO, PUERTO RICO 00976

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

SUPERBIZ REGISTERED AGENT, INC.

2761 VISTA PKWY UNIT E4

WEST PALM BEACH FL 33411

Having been named as registered agent 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..

x Paul Smith V.P.

SUPERBIZ REGISTERED AGENT, INC. / Registered Agent's signature

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PAGE 2 TRADE INSURANCE GROUP, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

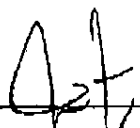
MANAGING MEMBER:

JOAQUIN TORRES

214 ST 4T29 COLINAS DE FAIR VIEW

TRUJILLO ALTO, PUERTO RICO 00976

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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.

JOAQUIN TORRES

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