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Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
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TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.

Travel With Carnet, LLC

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FAX AUDIT # H1400000680543

**ARTICLES OF ORGANIZATION
OF
Travel With Carnet, LLC**

ARTICLE I NAME

The name of the limited liability company is: Travel With Carnet, LLC

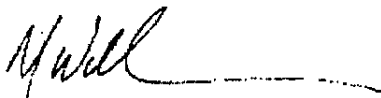
ARTICLE II ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be:
1395 Brickell Avenue Suite 800, Miami, Florida 33131.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Business Filings Incorporated, 515 E. Park Avenue, Tallahassee, Florida 32301. Located in the County of Leon.

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 605, F.S.



Signature: _____
Mark Williams, A.V.P. Business Filings Incorporated

Date: March 20, 2014

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TALLAHASSEE, FLORIDA

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ARTICLE IV MANAGERS/MEMBERS

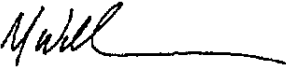
The management of the limited liability company is reserved for the managing members and the name and address of the member of the Limited Liability Company is:
TRAVEL WITH CARNET Srl, Av. Abraham Linconi, No. 847 Tercera Planta, Suite 3-C, Santo Domingo, Dominican Republic

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ARTICLE V DURATION

The duration for the limited liability company shall be: Perpetual.



Date: March 20, 2014

(In accordance with section 605.0203 (1) (b), 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.)

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717

608-827-5300

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