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FLORIDA LIMITED LIABILITY CO.  
IMPORTODO, LLC.

Certificate of Status	1
Certified Copy	1
Page Count	03
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**ARTICLES OF ORGANIZATION**  
**FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**Importodo, LLC.**

**Effective Date:** 05/22/2014

**FEIN:** 46-5752276

**ARTICLE II - Addresses:**

**The Principal Place of Business**

698 N. Homestead Blvd.  
Suite 101  
Homestead, Florida 33030

**Mailing Address**

P. O. Box 521850  
Miami, Florida 33152

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**ARTICLE III - Registered Agent, Registered Office:**

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

**Hersol, Inc.**

698 N. Homestead Blvd.,  
Suite 100  
Homestead, Florida 33030

**ARTICLE IV-**

The name and title of each person authorized to manage and control the Limited Liability Company:

**Mgr.**

**Importodo Ltda.**  
**Las Tarpas 2842**  
**Iquique, Chile**

**Mgr.**

**Hersol Capital Group, Inc.**  
**698 N. Homestead Blvd.**  
**Suite 100**  
**Homestead, Florida 33030**

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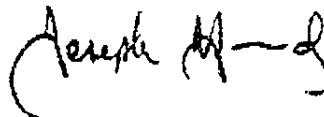
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**ARTICLE V-**

The Purpose(s) for which this Limited Liability Company is organized is (are):

**Import, Distribution, Representation, and Commerce of merchandise and goods in general; and any other lawful activity allowed by the Laws of the United States of America and the State of Florida.**

**Required Signatures:**



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**Signature of a member or an authorized representative of a member.**

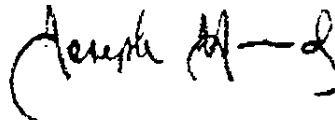
In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Joseph Hernandez

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**Typed or printed name of signee**

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..



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**Registered Agent's Signature (REQUIRED)**

Joseph Hernandez

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**Typed or printed name of authorized representative of Registered Agent**

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