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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Division of Corporations

Fax Number : (850)617-6383

From:

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Account Number : I20000000019

Fax Number

Phone : (305)552-5973 : (305)675-5944

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Email Address:

## FLORIDA LIMITED LIABILITY CO. MADALU LATAM LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

JAN 1 4 2015

Electronic Filing Menu

Corporate Filing Menu

Help

H15000010472

ARTICLES OF ORGANIZATION	FOR FLORIDA LIMITED LIABILITY CO	OMPANY
ARTICLE I - Name:		
The name of the Limited Liability Company is:		\$ 0. F.
, , ,		
Madalu LatAm LLC		mpany is:
	imited Liability Company, "L.L.C.," or	F"LLC.")
( PERCY N IV		
ARTICLE II - Address: The mailing address and street address of the principle.	ginal office of the Limited Liability Co.	mpany is:
memig and out and out of mo print	When orthogon and musing the present of the	
Principal Office Address:	Mailing Address:	
3850 Bird Road #600	3850 Bird Road, #600	
Miami, FL 33146	Mjami, FL 33146	
ARTICLE III - Registered Agent, Registered O	office. & Registered Agent's Signatur	re:
(The Limited Liability Company ounnot serve as it		
another business entity with an active Florida regi	istration.)	1
The name and the Florida street address of the reg	vistered agent are:	
The service and the trained attended and the table	The sea age is the sea	
Xavier A. Franco		
·	Name	
806 S. Douglas Road, S		(
Florida street address (P.	O. Box <u>NOT</u> acceptable)	1
Coral Gables	FL 33134	j
City	Zip	j
Having been named as registered agent and to ac	were and a service of the character	ared limited liability company at
the place designated in this certificate, I hereby	v accept the appointment as registered (	agent and agree to act in this
capacity. I further agree to comply with the pro-	visions of all statutes relating to the prop	per and complete performance
of my duties, and I am familiar with and accept	the obligations of my position as regist	ered agent as provided for in
\ 1 1 T	Chapter 605, F.S.	
V-2	<del>-</del>	_
Registered Agent'	s Signature (REQUIRED)	1
(COI	ntinued)	•

Page 1 of 2

<u> Citle:</u>	Name and Address:  Jose Malabet 3850 Bird Road #600
'AMBR" = Authorized Member	
MGR* = Manager	EG. 😼
MGR	Jose Malabet
	3850 Bird Road, #600
•	Miami, FL 33146
	Jose Malabet 3850 Bird Road, #600 Miami, FL 33146
	<u> </u>
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Use attachment if necessary)	
(Use attachment if necessary)	
•	e of filing: (OPTIONAL)
BV: Effective date, if other than the date	e of filing: (OPTIONAL) Decific and cannot be more than five business days prior to or 90 days after
EV: Effective date, if other than the date ective date is listed, the date must be sp	e of filing: (OPTIONAL) sectific and cannot be more than five business days prior to or 90 days after
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E V: Effective date, if other than the date ective date is listed, the date must be sp f filing.)  E VI: Other provisions, if any.  REOURED SIGNATURE:	ember or an authorized representative of a member.
E V: Effective date, if other than the date extive date is listed, the date must be sp f filing.)  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a me (In accordance with section 6)	ember or an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document
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EV: Effective date, if other than the date ective date is listed, the date must be sp of filing.)  EVI: Other provisions, if any.  REOURED SIGNATURE:  Signature of a m  (In accordance with section 6) constitutes an affirmation und I am aware that any false info	ember or an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document

Page 2 of 2

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

S 30.00 Certified Copy (Optional)
S 5.00 Certificate of Status (Optional)