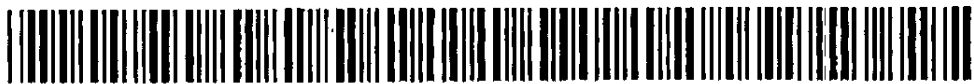


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**Florida Department of State
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FLORIDA DEPARTMENT OF STATE
BUREAU OF COMMERCIAL
INFORMATION SERVICES

To:

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

From:

Account Name : CLARA GIRALDO, P.A.
Account Number : I19990000017
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Fax Number : (305)485-1098

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
RKLATAM, LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY
OF**

RKLATAM,LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

RKLATAM,LLC.

ARTICLE II - ADDRESS

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

**20135 SW 132 AVE
MIAMI,FL 33177**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

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

PABLO SOLARI

20135 SW 132 AVE

Florida street address (P.O.BOX NOT acceptable)

MIAMI,FL 33177

City, State, and Zip

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

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MIAMI, FLORIDA

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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 Pablo Solari
REGISTERED AGENT'S SIGNATURE

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

PABLO SOLARI
20135 SW 132 AVE
MIAMI, FL 33177

MANAGER

CLAUDIO ERLICH CORTES SORIA
20135 SW 132 AVE
MIAMI, FL 33177

MANAGER

(An additional article must be added if an effective date is requested)

X Pablo Solari
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.)

PABLO SOLARI

Typed or printed name of signee

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