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To:

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

From:

Account Name : CLARA GIRALDO, P.A.
Account Number : I19990000017
Phone : (305)485-9300
Fax Number : (305)485-1098

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TALLAHASSEE, FLORIDA

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

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FLORIDA LIMITED LIABILITY CO.
RAM-WILL COLD COLDER, LLC.

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

15 MAY 12 AM 10:00

FLORIDA
DEPARTMENT OF
CORPORATIONS
INFORMATION SERVICES

H15 000 115 9443

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

RAM-WILL COLD COLDER, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

RAM-WILL COLD COLDER, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**7337 NW 37 AVE
MIAMI, FL. 33145**

The mailing address shall be:

**7337 NW 37 AVE
MIAMI, FL. 33145**

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

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

WILFREDO J. FARIAS RONDON

7337 NW 37 AVE

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

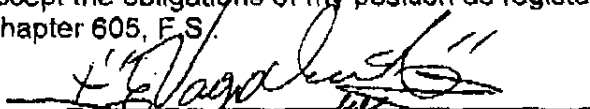
MIAMI, FL. 33145

City, State, and Zip

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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.


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.

WILFREDO J. FARIAS RONDON
7337 NW 37 AVE
MIAMI, FL. 33145

MANAGER

NERIO E. VELASQUEZ HERNANDEZ
7337 NW 37 AVE
MIAMI, FL. 33145

MANAGER

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


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.)

WILFREDO J. FARIAS RONDON

Typed or printed name of signee

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