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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

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Fax Number : (305) 633-9696

****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.
KF TRADING INTERNATIONAL LLC**

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
KF TRADING INTERNATIONAL LLC
A Florida Limited Liability Company**

ARTICLE I-NAME

The name of the Limited Liability Company is:

KF TRADING INTERNATIONAL LLC

ARTICLE II-ADDRESS:

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

PRINCIPAL OFFICE ADDRESS:

11481 NW 77TH STREET DORAL FL 33178

MAILING ADDRESS:

11481 NW 77TH STREET DORAL FL 33178

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

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

SHINE A LIGHT INC
(NAME)

11481 NW 77TH STREET
FLORIDA STREET ADDRESS (P.O BOX NOT ACCEPTABLE)

DORAL FL 33178
CITY, STATE, AND ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS 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 A REGISTERED AGENT AS PROVIDED FOR IN CHAPTER 605, F.S.


REGISTERED AGENT SIGNATURE

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ARTICLE IV ~~MANAGEMENT/MEMBER(S):~~

The name(s) and address (es) of each Manager or Managing Member is as follows:

Title:

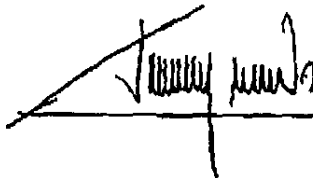
Name and address:

MGR= Manager

MGR= Manager

MGR = SHINE A LIGHT INC
MGRM

11481 NW 77TH STREET DORAL FL 33178



(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


SIGNATURE OF A MEMBER OR AN AUTHORIZED REPRESENTATIVE OF A MEMBER.

(In accordance with section 605.05^{(1)(b)}, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SHINE A LIGHT INC
Typed or printed name of signed