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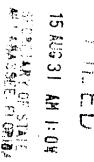
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COVER LETTER

	Division of Corporations	
SUBJEC	International Associates LLC	•
SUBJEC	CT:Name of Lin	nited Liability Company
The encl	losed Articles of Organization and fee(s) are	e submitted for filing.
Please re	eturn all correspondence concerning this ma	ntter to the following:
	Maria Souza	ŕ
		Name of Person
	International Associates LLC	
		Firm/Company
	8455 NW 68th St	
		Address
	Miami, FL 33166	
	C info@internationalassociates.net	ity/State and Zip Code
	E-mail address: (to be used	for future annual report notification)
For further	r information concerning this matter, please	e call:
	Maria Souza 23	745-6566
	Name of Person A	rea Code Daytime Telephone Number
Enclosed	d is a check for the following amount:	
\$125.00	Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: ,			
The name of the Limited Liabi	lity Company is:		
International Assoc (Must en	ciates LLC d with the words "Limited	Liability Compan	y,."L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street	address of the principal of	ffice of the Limite	d Liability Company is:
<u>Princi</u>	pal Office Address:		Mailing Address:
8455 NW 68th St		845	55 NW 68th St
Miami, FL 33166			umi, FL 33166
The name and the Florida stree	Maria Souza 8455 NW 68th St	Name	
	Florida street address	s (P.O. Box <u>NOT</u>	acceptable)
	Miami	FL	33166
	City	State	Zip
lace designated in this c <mark>er</mark> tificat arther agree to comply with the p	e. I hereby accept the appo provisions of all statutes re	ointment as registe clating to the prope	ne above stated limited liability company at the red agent and agree to act in this capacity. I er and complete performance of my duties, and I as provided for in Chapter 605, F.S

(CONTINUED)

Page 1 of 2

15 MJG 31 MM 1: 04

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Marcos S Brandao
	8455 nw 68th St
	Miami, FL 33166
AAGIND	D. 1. (1P.)
AMBR	Robert Hickey
	8455 nw 68th St
	Miami, FL 33166
AMBR	Stephen Sommers
	8455 nw 68th St
	Miami, Fl. 3366
	•
	
	William William Control Contro
(Use attachment if necessary)	
	ist be specific and cannot be more than five business days prior to or 90 da
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