

Division of Corporations

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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:

Account Name : RASCO KLOCK PEREZ & NIETO, P.L.
Account Number : 104076000124
Phone : (305) 476-7100
Fax Number : (305) 476-7102

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

Email Address:

aperez@rascoklock.com

**FLORIDA LIMITED LIABILITY CO.
RALONS AMERICA/GOVERNMENT BUSINESS
DEVELOPMENT**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I. - Name

The name of the Limited Liability Company is:

**RALONS AMERICA/GOVERNMENT BUSINESS DEVELOPMENT
JOINT VENTURE, LLC**

ARTICLE II. - Address

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

**166 MADEIRA AVENUE
Coral Gables, FL 33134**

ARTICLE III. - Registered Agent, Registered Office, & Registered Agent's Signature:

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

**ALFONSO J. PEREZ, ESQ.
2555 Ponce de Leon Blvd.
Suite 600
Coral Gables, Florida 33134**

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, Florida Statutes.

Audit No: H16000298964 3
This instrument was prepared by:
Alfonso J. Perez, Esq.
Rasco Klock Perez & Nieto, P.L.
2555 Ponce de Leon Blvd., Suite 600
Coral Gables, Florida 33134
(305) 476-7100

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REGISTERED AGENT:


Alfonso J. Perez

ARTICLE IV. - Management:

The Limited Liability Company is to be managed and controlled by one or more managers.

The names and addresses of the managers who are to serve as initial managers are:

Name of Manager:

MARIANO AGUILO

Name of Manager:

JUAN CARLOS LEY

ARTICLE V: Effective date, if other than the date of filing:
_____. (OPTIONAL)

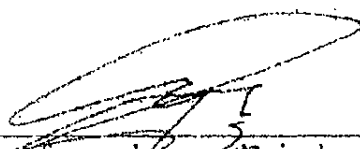
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

Audit No.: H16000298964 3
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Signature of a member or 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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