

Florida Department of State
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To:

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

From:

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

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

**FLORIDA LIMITED LIABILITY CO.
LATIN EVOLUTION, LLC.**

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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

LATIN EVOLUTION, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

LATIN EVOLUTION, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**2300 NW 81 ST
MIAMI, FL 33147**

The mailing address shall be:

**2300 NW 81 ST
MIAMI, FL 33147**

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

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

YUSNEL PEREZ

2300 NW 81 ST

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

MIAMI, FL 33147

City, State, and Zip

FILED
17 SEP 29 AM 9:21
CLERK OF COUNTY
OF MIAMI
MIAMI, FL 33130

**CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300**

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.

YUSNEL PEREZ
2300 NW 81 ST
MIAMI, FL 33147

PRESIDENT

(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.)

YUSNEL PEREZ
Typed or printed name of signee

CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300