

To: 18506176381 From: 14694451465 Date: 09/10/18 Time: 11:16 AM Page: 01/03

9/10/2018

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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 : LEGALINC CORPORATE SERVICES INC.  
Account Number : I20180000011  
Phone : (844)386-0178  
Fax Number : (214)317-4754

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
T.R.A. SERVICES, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
| Page Count            | 02       |
| Estimated Charge      | \$155.00 |

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TALLAHASSEE, FL

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**J. FASON**

SEP 11 2018

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

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**T.R.A. SERVICES, LLC**

**ARTICLE II - ADDRESS:**

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


**7678 COURTYARD RUN W  
BOCA RATON, FL 33433**

**ARTICLE III - Registered Agent, Registered Office & Registered Agent Signature:**

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

**RICARDO ALFONSO TORRES  
7678 COUTYARD RUN W  
BOCA RATON, FL 33433**

Having been named as registered agent and to accept service of process at for the above stated corporation at the place designated in these Articles of Incorporation, 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.

  
\_\_\_\_\_  
Registered agent's Signature (REQUIRED)

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**Prepared by:**  
**Firno Maldonado c/o Regiones Unidas**  
**8010 W. Sample Road**  
**Coral Springs, FL 33065**  
**Phone (954) 344-3555**

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**ARTICLE IV – Manager(s) or Managing Member(s)**

The name and address of each Manager and managing Members is as follows:

**MGRM:  
RICARDO ALFONSO TORRES  
7678 COURTYARD RUN W  
BOCA RATON, FL 33433**

**ARTICLE IV – Effective Date**

**September 10<sup>th</sup>, 2018**

A handwritten signature in black ink, appearing to be 'Ricardo', written over a horizontal line.

**RICARDO ALFONSO TORRES / *Manager***

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