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To:

Division of Corporations

Fax Number : (850)617-6361

From:

Account Name : VDT CORPORATE SERVICES

Account Number : I20180000047 : (305)678-1516 : (786)542~5995 Fax Number

**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. **ARAMI LLC**

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Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to form a Florida Limited Liability Company pursuant to Chapter 605, Florida Statutes. All information included in the Articles of Organization must be in English and must be typewritten or printed legibly. If this requirement is not met, the document will be returned for correction(s). The Division of Corporations suggests using the sample articles merely as a guideline. Pursuant to s. 605.0201, Florida Statutes, additional information may be contained in the Articles of Organization.

The name of a limited liability company must be distinguishable on the records of the Florida Department of State.

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

NOTE: This form for filing Articles of Organization is basic. Each limited liability company is a separate entity and as such has specific goals, needs, and requirements. Additionally, the tax consequences arising from the structure of a limited liability company can be significant. The Division of Corporations recommends that all documents be reviewed by your legal counsel. The Division is a filing agency and as such does not render any legal, accounting, or tax advice. The professional advice of your legal counsel to ascertain exact compliance with all statutory requirements is strongly recommended.

Pursuant to \$,605,0201, Florida Statutes, the Articles of Organization must set forth the following:

ARTICLE I:

The name of the limited liability company, which must contain the words "Limited Liability Company," or the abbreviation "L.L.C.," or "LLC."

ARTICLE II:

The mailing address and the street address of the principal office of the limited liability company.

ARTICLE III

The name and Florida street address of the limited liability company's registered agent. The registered agent must sign and state that he/she is familiar with and accepts the obligations of the position. P.O. Boxes are not acceptable.

ARTICLE IV: The name and address of each person authorized to manage and control the Limited Liability Company. Although this information is optional at this time, most financial institutions require this information to be recorded with the Florida Department of State in order to open an account. The Department of Financial Services also requires this information to issue Workers' Compensation.

Use "AMBR" for members who are authorized to manage and control the company. Use "MGR" for managers of manager-managed LLCs.

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

What is an effective date?

You may list an effective date if you would like the limited liability company's existence to become effective on a date other than the date it is filled by this office., The effective date can be up to 5 business days prior to the date of receipt or up to 90 days after the date of receipt.

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The entity's first annual report form will be due January 1" of the calendar year following the year of formation. If a limited liability company is created late in the calendar year and it doesn't expect to commence business until on or after January 1" of the uncoming year, it should add an effective date of January 1 for the coming year.

If the effective date is in the next calendar year, it will delay the requirement to file an annual report until the following calendar year. Example: A limited liability company is formed December 1, 2007. If it added an effective date of January 1, 2008, the first annual report would not be due until January 1, 2009. If a 2008 effective was not listed, the first annual report would be due January 1, 2008.

Signature:

Articles of Organization must be executed by an authorized person, and the execution of the document constitutes an affirmation under the penalties of perjury that the facts stated therein are true.

FILING FEES:

\$ 125,00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (OPTIONAL)

\$ 5.00 Certificate of Status (OPTIONAL)

A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fees and any optional certificate or copy.

A cover letter containing your name, address and daytime telephone number should be submitted along with the articles of organization and the check. The mailing address and courier address are:

Mailing Address
New Piling Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
(850) 245-6052

Street/Courier Address
New Filing Section
Division of Corporations
Clifton Bullding
2661 Executive Center Circle
Tallahassee, FL 32301
(850) 245-6052

Any further inquiries concerning this matter should be directed to the New Filing Section by calling (850) 245-6052.

Important Information About the Requirement to File an Annual Report

All Florida Limited Llability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$138.75. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

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COVER LETTER

	w Filing Section vision of Corporations		
SUBJECT:	ARAMI LLC		
SUBJECT		imited Liabilit	y Company
The enclose	ed Articles of Organization and fee(s)	are submitted t	for filing.
Please retui	n all correspondence concerning this	matter to the fo	llowing:
	DANIEL MERLINO		
		Name of I	Person
	VDT CORPORATE SERVICES LL	c	
		Firm/Cor	прапу
	150 SE 2ND AVE - SUITE 905		
		Addre	53
	MIAMI, FLORIDA 33131		
	NACON ROTA TION (AS A INTROPERI	City/State and	•
-	INCORPORATION@SAINTJOSEPI E-mail address: (to be us		
For further is	iformation concerning this matter, ple		······································
	DANIEL MERLINO	, 305	503-9867
	Name of Person	Area Code	Daytime Telephone Number
Englosed is	a check for the following amount;		
\$125.00 F		Certific	O Filing Fee & S160,00 Filing Fee, cd Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Malling 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

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Tallahusace, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARAMI LLC	
(Must contain the words "Limited Lis	ility Company, "L.L.C.," or "LLC.")
II - Address:	٧,
	of the Limited Liability Company is:
g address and street address of the principal office	of the Limited Liability Company is:
	of the Limited Liability Company is: Mulling Address:
g address and street address of the principal offic	

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

VDT CORPORATE SERVICES LLC
Name

150 SE 2ND AVE- SUITE 905

Florida street address (P.O. Box NOT acceptable)

MIAMI FLORIDA 33131

City State Zip

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 (REQUIRED)

(CONTINUED)

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Title:	Name and Address:
"AMBR" - Authorized Member	
"MGR" = Manager	TANDA CARRIEL A WOLA OLIARTARA
MGR	SANDRA GABRIELA TOJA QUARTARA
	150 SE 2ND AVE SUITE 906
	MIAMI, FLORIDA 33131
MGR	JOSE RAFAEL MARTINEZ CASTILLO
	150 SE 2ND AVE SUITE 906
	MIAMI,FLORIDA 33131
	SANDRA GABRIELA TOJA QUARTARA 150 SE 2ND AVE SUITE 906 MIAMI, FLORIDA 33131 JOSE RAFAEL MARTINEZ CASTILLO 150 SE 2ND AVE SUITE 906 MIAMI, FLORIDA 33131
(Use attachment if necessary)	•
JEV: Effective date, if other than the fective date is listed, the date must i	odute of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days af
EV: Effective date, if other than the fective date is listed, the date must be of filing.)	be specific and cannot be more than five business days prior to or 90 days af not meet the applicable statutory filing requirements, this date will not be listo
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