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COVER LETTER

New Filing Section

Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT: RWB Trading LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Romeo Badilla Name of Person
RWB Trading LLC Film/Company
2726 Sun Key Pl
Kissiminee, FL 34747 City/State and Zip Code
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Rounco adi a 503 459 - 8666 505 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: VS125.00 Filing Fee Status Certificate of Status Certified Copy (additional copy is enclosed) S155.00 Filing Fee Status Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing Section DivisionDivision of CorporationsThe Centre of TallahasseeP.O. Box 63272415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Lim	uted Liability Con	npany is:			
	RWB	Trading	LLC		
	(Must contain the	e words "Limited Lia	bility Company, "I	IL.C.," or "LLC.")	

ARTICLE II - Address:

ARTICLE I - Name:

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

Principal Office Address:	Mailing Address:
2726 Sun Key Pl Kissimmee, Ft 34749	7862 W [VIO Bronson Momorial Hwy, # 165 Kissimmee, Fl. 34747)

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida stre	eet address of the registered as	gent are:	1
	Shei	la Sai	ntos
		Vame	
	11374 Biogu	aphy 2	Jac)
	Florida street address (
	Orlando	FL_	32832
	City	State	7in

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: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Pone Badilla 2726 sun Kuy Pl Kissimmer, FL 34747
MGR	
MGR	Perlita Bodilla 2726 Sun Key Pl Kissimmee, FR 34747
(Use attachment if necessary)	
EV: Effective date, if other than the ctive date is listed, the date must f filing.) the date inserted in this block does nent's effective date on the Depart	not meet the applicable statutory filing requirements, this date will not b
E V: Effective date, if other than the effective date is listed, the date must f filing.) the date inserted in this block does nent's effective date on the Depart E VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 denot meet the applicable statutory filing requirements, this date will not b
E V: Effective date, if other than the effective date is listed, the date must f filing.) the date inserted in this block does nent's effective date on the Depart E VI: Other provisions, if any. REOURED SIGNATURE: Signature of This document is early am aware that any	not meet the applicable statutory filing requirements, this date will not be ment of State's records. The amember of an authorized representative of a member an authorized representative of a member of state in accordance with section 605.0203 (1) (b), Florida Statutes, of false information submitted in a document to the Department of State
E V: Effective date, if other than the effective date is listed, the date must f filing.) the date inserted in this block does nent's effective date on the Depart E VI: Other provisions, if any. REOURED SIGNATURE: Signature of This document is early am aware that any	not meet the applicable statutory filing requirements, this date will not be ment of State's records. The amember of an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes.