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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE <u>8/6/2021</u>			**WA	ILK IN**
ENTITY NAMERUB	I INVERSIONES LLC			
DOCUMENT NUMBI	ER			
	PLEASE FILE T	THE ATTACHED AND RETURN		
xxxxxxx	Plain Copy			
	Certified Copy			
	Certificate of Status		& . ,∶	2021 AUG
	PLEASE OBTAIN THE	FOLLOWING FOR THE ABOVE ENTITY		6
	Certified Copy of Arts	is & Amendments		ម្រ 53
	•	is & Amendments Complete File (Including Annual Rep	oorts)	(A)
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	, ,	Reflecting:		
	APOSTILLE'/	NOTARIAL CERTIFICATION		
COUNTRY OF DESTIN	IATION			
NUMBER OF CERTIFIC				
TOTAL OWED \$ 125	5.00	ACCOUNT # 120140000108 / Control United Corporate Services, Inc. Thank you so	they	pad
Please call Tina at	the above number for	any issues or concerns. Thank you so	much!	/

COVER LETTER

	Filing Section sion of Corporations	
SUBJEC	Rubi Inversiones LLC	
SOBJEC	Name of Limited Liability Company	
The encle	Articles of Organization and fee(s) are submitted for filing.	
Please re	all correspondence concerning this matter to the following:	
	Sergio Viveros	
	Name of Person	
	C&TP Latam Corp.	_
	Firm/Company	m 3 € &
	2600 S. Douglas Road	3821 AUG
	Address	- জ - ৬
	Coral Gables, Florida 33134	-
	City/State and Zip Code impuestos@taxplanning.com.co	نن - 7
	E-mail address: (to be used for future annual report notification)	_ <u>က</u>
or further	rmation concerning this matter, please call:	
	Sergio Viveros at (305)307-1945	
	Name of Person Area Code Daytime Telephone Number	
Enclosed	check for the following amount:	
ज् 1\$125.6	ling Fee	Ŀ
	Mailing Address New Filing Section Street Address New Filing Section Division	
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32303 Tallahassee, FL 32303	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Ruhi	Inversiones	LLC
122101	THE CLAROTTES	4 4 4 4 4 4

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
2100 S. Ocean Lane #809	2100 S. Ocean Lane #809
Fort Lauderdale, FL 33316	Fort Lauderdale, FL 33316
For Eadderdate, FL 55516	FOIL PARAGETERING, 11. 355.11

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 street address of the registered agent are:

	Name	
3458 Lakeshore Dri	ve	
Florida street addre	ss (P.O. Box <u>NOT</u>	acceptable)
Tallahassee	FL	32312
City	State	Zip

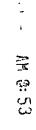
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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..

Michael A. Barr

Registered Agent's Signature (REQUIRED)

Michael A. Barr, President

(CONTINUED)



ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:		Name and Address:		
"AMBR" = Auth	orized Member			
"MGR" - Manag				
Manager		Olga Bretton		
***************************************		2100 S. Ocean Lane #809		
		Fort Lauderdale, FL 35316		
			- ———	
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