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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Art of Inc. File LTD Partnership File Forcing Corp. File L.C. File Ficitious Name File Trade/Service Mark Merger File Art. of Anned. File RA Resignation Dissolution / Windrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Certificate of Fictitious Name Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Search Fictitious Search Driving Record Vehicle Search Driving Record Requested by: SETH Name Date Time Walk-In Will Pick Up Courier LCC 11 Retrieval UCC 11 Retrieval UCC 11 Retrieval UCC 11 Retrieval Courier			
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L.C. File			LTD Partnership File
Fictitious Name File			Foreign Corp. File
Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Owner Search Vehicle Search Driving Record Requested by: SETH Name Date Time Will Pick Up Courier Cart. Copy Certificate of File Courier Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Fictitious Owner Search UCC 1 or 3 File UCC 11 Search UCC 11 Search UCC 11 Retrieval UCC 11 Retrieval Courier			LC. File
Merger File			Fictitious Name File
Art. of Amend. File			Trade/Service Mark
RA Resignation			Merger File
Dissolution / Withdrawal			Art, of Amend, File
Annual Report / Reinstatement			RA Resignation
Cert. Copy			Dissolution / Withdrawal
Photo Copy			Annual Report / Reinstatement
Certificate of Good Standing			Cert. Copy
Certificate of Status			Photo Copy
Certificate of Fictitious Name			Certificate of Good Standing
Corp Record Search			Certificate of Status
Officer Search			Certificate of Fictitious Name
Fictitious Search			Corp Record Search
Fictitious Owner Search			Officer Search
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Walk-In Will Pick Up Courier			— UCC 11 Search
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SECRETARY OF STATE TALLAHASSEE, FL

ARTICLE I - Name: The name of the Limited Liability Company is:

RN Traveling Adventu (Must contain	n the words "Limited Liabi	lity Company, "L.L.	C.," or "LLC.")
ARTICLE II - Address:			
he mailing address and street add	ress of the principal office	of the Limited Liabi	lity Company is:
<u>Principal</u>	Office Address:		Mailing Address:
1989 NW 88 Court		1989 NW	88 Court
Suite No. 101		Suite No.	101
Doral, FL 33172		Doral, FL	22172
ARTICLE III - Registered Agen The Limited Liability Company canother business entity with an act	annot serve as its own Reg	egistered Agent's S	gnature:
ARTICLE III - Registered Agen The Limited Liability Company o	annot serve as its own Reg tive Florida registration.)	egistered Agent's Sistered Agent. You n	gnature:
ARTICLE III - Registered Agen The Limited Liability Company canother business entity with an act	annot serve as its own Reg tive Florida registration.)	egistered Agent's Sistered Agent. You n	gnature:
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ARTICLE III - Registered Agen The Limited Liability Company canother business entity with an act	annot serve as its own Reg tive Florida registration.) Idress of the registered age ARG Corporate Services. Na	egistered Agent's Sistered Agent. You not are: LLC me No. 101	ignature: nust designate an individual or
ARTICLE III - Registered Agen The Limited Liability Company canother business entity with an act	annot serve as its own Reg tive Florida registration.) Idress of the registered age ARG Corporate Services. Na 1989 NW 88 Court, Suite	egistered Agent's Sistered Agent. You not are: LLC me No. 101	ignature: nust designate an individual or

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..

(CONTINUED)

Signature (REQUIRED)

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

<u>Title:</u> "AMBR" = Author	Name and Address: zed Member
"MGR" = Manager	
MGR	Amy Capobianco 1989 NW 88 Court, Suite No. 101 Doral, FL 33172
	SECRET TAILLA
	ARY OF STA
	<u> </u>
	E, F
(Use attachment if	
If an effective date is listed, he date of filing.) Note: If the date inserted in	the date must be specific and cannot be more than five business days prior to or 90 days after this block does not meet the applicable statutory filing requirements, this date will not be listed as c on the Department of State's records.
ARTICLE VI: Other provisi	ons, if any.
 -	
REQUIRED SIGN	TATURE: Somales
Lan	Signature of a member of an authorized representative of a member. s document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, a aware that any false information submitted in a document to the Department of State stitutes a third degree felony as provided for in s.817.155, F.S.
	Ricardo A. Gonzalez
	Typed or printed name of signee
	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)