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| Sertified Copies | ` | Certific | ates of | Status |
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SECRETARY OF STATE

J. SAULSBERRY EXAMINER JAN 13 2012

COVER LETTER

| ECT: Laun America Cons | Name of Limited Liability Company | |
|--|---|---------------------------------------|
| | Liability Company for Authorization to Transact Business the above referenced foreign limited liability company to to | |
| e return all correspondence concerning th | is matter to the following: | |
| Manuel Campos Galv | van | |
| | Name of Person | |
| CG Abogados | | |
| | Firm/Company | |
| | | |
| 77 Harbor Drive, Sui | te 5 | |
| | Address | |
| Key Biscayne, FL 33 | 149 | , |
| rey biscayile, i E oo | City/State and Zip Code | |
| | Only State and Esp Code | 2012 JAN 12 SECRETAR) ALLAHASSI |
| mcg@cg-abogado | s.com . | AR A |
| E-mail addre | ess: (to be used for future annual report notification) | N 12 |
| orther information concerning this matter, | please call: | |
| · · | | |
| Manuel Campos | at (646) 226-3389 | AM 8: (OF STATE E. FLOR |
| Name of Person | Area Code & Daytime Telephone Number | 33 |
| MAILING ADDDECC. | CEREET A DARROS | , fut |
| MAILING ADDRESS: Division of Corporations | STREET ADDRESS: Division of Corporations | |
| Registration Section | Registration Section | |
| P.O. Box 6327 | Clifton Building | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| Latin America Consulting Group LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
|---|
| If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") |
| 2. New York 3. 26-2297214 |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) |
| 03/26/2008 5 perpetual |
| (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") |
| § 02/01/2012 |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) |
| 1200 Brickell Avenue, Suite 1950 |
| Miami, Florida 33131 |
| (Street Address of Principal Office) |
| B. If limited liability company is a manager-managed company, check here ✓ |
|). The name and usual business addresses of the managing members or managers are as foligies: |
| Manuel Campos Galvan 77 Harbor Drive, Suite 5, Key Biscayne, FL 33149 |
| Enrique Caballero 77 Harbor Drive, Suite 5, Key Biscayne, FL 33149 |
| |
| 0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under eath of the translator must be submitted.) |
| 1. Nature of business or purposes to be conducted or promoted in Florida: |
| Consulting and administrative outsourcing services |
| (ANN) |
| Signature of a member or an authorized representative of a member. |
| (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) |

Typed or printed name of signee

Manuel Campos Galvan

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| ١. | The | name | of the | Limited | Liability | Company | is |
|----|-----|------|--------|---------|-----------|---------|----|
|----|-----|------|--------|---------|-----------|---------|----|

Latin America Consulting Group LLC

If unavailable, the alternate to be used in the state of Florida is:

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

| Manuel Campos | | ∃ ~ |
|-----------------------|---------------------|-----------------------------------|
| (Name) | | 2012 JAN I SECRETA FALLAHAS |
| 77 Harbor Drive, Suit | AS AS | |
| Florida Street Ad | TARY ASSET | |
| Key Biscayne | _{FL} 33149 | AM 8: OF STA |
| City/State/Zip | | RIDA |

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 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

State of New York Department of State } ss

I hereby certify, that LATIN AMERICA CONSULTING GROUP LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/26/2008, and that the Limited Liability Company is existing so far as shown by the records of the Department.



2012 JAN 12 AH 8: 33
SECRETARY OF STATES
TALL AHASSEE, FLORID

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 30th day of December two thousand and eleven.

First Deputy Secretary of State