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To:

Division of Corporations  
Fax Number : (850) 617-6260

From:

Account Name : HARVARD BUSINESS SERVICES, INC  
Account Number : 120060000045  
Phone : (302) 645-7400  
Fax Number : (302) 645-1280

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

Email Address: \_\_\_\_\_

Foreign Limited Liability Company  
Latin America L.L.C.

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 03 2017

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1. Latin America L.L.C.  
(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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. LOS ALTOS DE LAS COLINAS, CASA #3 6. LOS ALTOS DE LAS COLINAS, CASA #3  
(Street Address of Principal Office) (Mailing Address)  
LAS COLINAS, MANAGUA LAS COLINAS, MANAGUA  
NICARAGUA NICARAGUA

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Registered Agents Inc.  
Office Address: 3030 N. Rocky Point Dr., STE 150A  
Tampa, Florida 33697  
(City) (Zip code)

## Registered agent's acceptance:

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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. Further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are

| Title or Capacity: | Name and Address:                                                                                             | Title or Capacity: | Name and Address: |
|--------------------|---------------------------------------------------------------------------------------------------------------|--------------------|-------------------|
| MEM                | ALEXIS ARTURO VEGA ABURTO<br>Bo. Los Maneyes, Casa #30<br>Apartado Postal 0365<br>Jinotepe, Carazo, NICARAGUA |                    |                   |
|                    |                                                                                                               |                    |                   |
|                    |                                                                                                               |                    |                   |

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

[Signature]  
Signature of authorized person

ALEXIS ARTURO VEGA ABURTO

Typed or printed name of signer

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LATIN AMERICA L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LATIN AMERICA L.L.C." WAS FORMED ON THE EIGHTEENTH DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



5882713 8300

SR# 20175541251

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line.

Authentication: 202992085

Date: 08-02-17