

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : SILVA'S ENTERPRISE, INC.

Account Number : I20020000100 Phone : (305)944-9755 Fax Number : (305)944-0955

LIMITED LIABILITY COMPANY

DELI MEATS FACTORY, LLC

Certificate of Status	Δ
Certified Copy	
Page Count	- 01
Estimated Charge	\$155.00

'Department of State 4/25/2003 3:53 PAGE 1/1 RightFAX



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 25, 2003

SILVA'S ENTERPRISE, INC.

SUBJECT: DELI MEATS FACTORY, LLC

REF: W03000011933

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The document was signed by an incorporator and LLC's do not have incorporators.

Please return your document, along with a copy of this letter, within 50 f days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley Document Specialist Amount charged: 155.00 FAX Aud. #: H03000143464 Letter Number: 303A00025248 H030001434643

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Article I

The name of the Limited Liability Company is: DELI MEATS FACTORY, LLC

Article II

The street address of the principal office of the Limited Liability Company is: 5844 NW 109 Ave.

Miami FL 33178

The mailing address of the Limited Liability Company is:

16300 NE 19 Ave.

Suite C

North Miami Beach FL 33162

Article III

The name and Florida street address of the registered agent is:

FERNANDO SILVA

16300 NE 19 Ave.

Suite C

North Miami Beach FL 33162

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.

Registered Agent Signature: FERNANDO SILVA

SILVA S

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Article IV

The Limited Liability Company is a manager managed company

Article V

The name, address and distribution of managing members/managers are:

Title: MGR

JOSE LUIS CAMPOS

50% Participation

5844 NW 109 AVE. MIAMI FL 33178

Title: MGR

GIANCARLO COZZO

50% Participation

5844 NW 109 AVE. MIAMI FL 33178

Article VI

The effective date for this Limited Liability Company shall be: 04/25/2003

Signature of member or an authorized representative of a member

Jose Luis Campos