

7/26/13

Division of Corporations

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FLORIDA LIMITED LIABILITY CO.  
TUBINCA TUBERIAS INDUSTRIALES C.A. LLC

Certificate of Status	1
Certified Copy	0
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JUL 29 2013  
D. BRUCE

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

*The name of the Limited Liability Company is:*

**TUBINCA TUBERIAS INDUSTRIALES C.A. LLC**

*(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")*

**ARTICLE II**

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

**Principal Office Address:**  
150 S.E. 2<sup>ND</sup> AVE SUITE 1110  
MIAMI, FL 33131

**Mailing Address**  
150 S.E. 2<sup>ND</sup> AVE SUITE 1110  
MIAMI, FL 33131

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**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:*

**R&P ACCOUNTING & TAXES INC**

*Name*

**150 S.E 2<sup>ND</sup> AVE SUITE 1110**

*Florida street address (P.O. Box NOT acceptable)*

**MIAMI, FL 33131**

*FL City, State, and 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 608, F.S*

X \_\_\_\_\_  
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**Registered Agent's Signature (REQUIRED)**

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**ARTICLE IV**

*Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:*

*Title:*

**TUBINCA TUBERIAS INDUSTRIALES C.A. LLC**

**WILMER O. CASTILLO G.**

**MGR**

**FRANKLIN A. CASTILLO R.**


**MGR**

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**ARTICLE V**

*Effective date, if other than the date of filing (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five  
business days prior to or 90 days after the date of filing.)*

**REQUIRED: SIGNATURE**

  
\_\_\_\_\_  
*Signature of a member or an authorized representative of a member.*

*(In accordance with section 608.408(3), Florida Statutes, the execution of this document  
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)*

**FRANKLIN A. CASTILLO R.**

*Typed or printed name of signee*

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