

L22000027477  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : GG CONSULTING SERVICES CORP  
Account Number : 120210000143  
Phone : (786)631-8656  
Fax Number : (786)368-4066

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

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

FLORIDA LIMITED LIABILITY CO.  
QUALIX LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

HL

2022 JAN 25 AM 10:57

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2022 JAN 25 PM 1:15

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** QUALIX, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEXIS FROMETA  
Name of Person

ALEXIS FROMETA, P.A  
Firm/Company

3191 CORAL WAY, SUITE #404A  
Address

MIAMI, FL 33145  
City/State and Zip Code

AFrometa@south-floridacpa.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALEXIS FROMETA at ( 305 ) 319-1071  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

QUALIX, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "L.I.C.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

3191 CORAL WAY  
SUITE #404A  
MIAMI, FL 33145

3191 CORAL WAY  
SUITE #404A  
MIAMI, FL 33145

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:

ALEXIS FROMETA, P.A  
Name

3191 CORAL WAY, SUITE #404A  
Florida street address (P.O. Box **NOT** acceptable)

MIAMI                      FL                      33145  
City                              State                              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 605, F.S..*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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2022 JAN 25 PM 1:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

FERNANDO RAMIRO ABAD  
3191 CORAL WAY SUITE #404A  
MIAMI, FL 33145

MGR

SEBASTIAN EDUARDO DOURS  
3191 CORAL WAY SUITE #404A  
MIAMI, FL 33145

AMBR

EZEQUIEL PABLO MAIO  
3191 CORAL WAY SUITE #404A  
MIAMI, FL 33145

AMBR

FEDERICO SCARABINO  
3191 CORAL WAY SUITE #404A  
MIAMI, FL 33145

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 01/24/2022 (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.  
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 817.135, F.S.

SEBASTIAN E. DOURS  
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)

2022 JAN 25 PM 1:15  
SECRETARY OF STATE  
ALBANY, FLORIDA

FILED

**ARTICLE IV-**

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

Title:  
"AMBR" = Authorized Member  
"MGR" = Manager  
AMBR

Name and Address:

MARCELA INES BROOK  
3191 CORAL WAY, SUITE #404A  
MIAMI, FL 33145

AMBR

ALEJO EMMANUEL BERTOLO  
3191 CORAL WAY, SUITE #404A  
MIAMI, FL 33145

AMBR

ANDRES MARTIN SZWARC  
3191 CORAL WAY, SUITE #404A  
MIAMI, FL 33145

AMBR

MATIAS EZEQUIEL MOREIRA  
3191 CORAL WAY, SUITE #404A  
MIAMI, FL 33145

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 01/24/2022 (OPTIONAL)

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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.

SEBASTIAN E. DOURS

Typed or printed name of signer

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)

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TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

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