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Division of Corporations

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: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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Email Address:

FLORIDA LIMITED LIABILITY CO. OCEAN QUEEN DISTRIBUTION, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	DISTRIBUTION, LLC				
(Must o	contain the words "Limited	Liability Company,	"L.L.C.," or "LLC.'")	_	
ARTICLE II - Address: The mailing address and stre	et address of the principal o	office of the Limited	Liability Company is:		
<u>Prin</u>	cipal Office Address:		Mailing Address:		
5320 SW 87 AVE		5320	SW 87 AVE		
MIAMI, FL 33165			MI, FL 33165 ≥ :	202	
ARTICLE III - Registered	Agent, Registered Office, any cannot serve as its own an active Florida registration and address of the registered	& Registered Agent. Yon.) d agent are:	72.	2022 MAY 25 AM	
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration	& Registered Agent. Yon.) d agent are:	t's Signature: (ou must designate an individual or SSEC)	25 AM	<u>-</u>
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, any cannot serve as its own an active Florida registration and address of the registered	& Registered Agent 1 Registered Agent 2 On.)	t's Signature:	25 AM	<u>-</u>
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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 pylvided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED

(CONTINUED)

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

entre de la composition de la composit

"AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	DOLANDA DA LINA	
MGK	ROLANDO F. HEVIA	
	5320 SW 87 AVE	
	MIAMI, FL 33165	
MGR	HECTOR S. ESQUIJEROSA	
	5320 SW 87 AVE	
	MIAMI, FL 33165	
	MIAMI, 1 L 33 103	
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