

L9500000547

Lazarus Corporate Industries, Inc.
(Requestor's Name)
890 S.W. 87 Avenue, Suite 16
(Address)
Miami, Florida 33174 305-552-5773
(City, State, Zip) (Phone #)

OFFICE USE ONLY

400001542694
-07/20/95--01086--013
***285.00 ***285.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Uniflo, L.C.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk In ☒ Pick up time 2:00 ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
Profit	
NonProfit	
<input checked="" type="checkbox"/> Limited Liability	
Domestication	
Other	

AMENDMENTS	
Amendment	
Resignation of R.A., Officer/Director	
Change of Registered Agent	
Dissolution/Withdrawal	
Merger	

OTHER FILINGS	
Annual Report	
Fictitious Name	
Name Reservation	

REGISTRATION/ QUALIFICATION	
Foreign	
Limited Partnership	
Reinstatement	
Trademark	
Other	

FILED
95 JUL 19 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. HENDRICKS JUL 19 1995

Examiner's Initials

**TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY**

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: VENEFLO, L.C.
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy of the articles of organization and a check for :

VS \$285.00
Filing Fee
& Registered
Agent designation

☐ \$293.75
Filing Fee,
Registered Agent
Designation &
Certificate

☐ \$337.50
Filing Fee,
Registered Agent
Designation &
Certified Copy

☐ \$346.25
Filing Fee,
Registered Agent
Designation,
Certified Copy &
Certificate

FROM: RONALD GOULD
Name (Printed or typed)

7th floor 1110 Brickell Avenue Miami, Florida 33131
Address

City, State & Zip

305 865-2962
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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

ARTICLE I - Name:

The name of the Limited Liability Company is: VENEFLOR, L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
c/o RONALD GOULD 7th fl. 1110 Brickell Avenue, Miami, Florida 33131

ARTICLE III - Duration:

The Limited Liability Company shall be dissolved thirty years from the date of Incorporation, unless its duration is extended by a vote of the majority of its MEMBERS, but in no event shall the extension be for more than twenty years.

ARTICLE IV - Management:

The LIMITED LIABILITY COMPANY shall be managed by::

ANTONIO CECCHINI c/o Ronald Gould 7th fl. 1110 Brickell Avenue Miami, Fl. 33131
ALVARO LOPEZ LAZO " " " " " " " " " "
GIUSEPPE OTTOLINO " " " " " " " " " "

The above named MANAGERS have entered into a management agreement which details the management duties of each of the above named persons.

FILED
95 JUL 19 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - Admission of Additional Member

The terms and conditions for the admission of new members and the addition of new members shall be determined by the written consent of a minimum of two thirds of the existing members.

ARTICLE VI - Members Rights to Continue Business.

The remaining members of the LIMITED LIABILITY COMPANY may continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the LIMITED LIABILITY COMPANY, provided a majority of the other members vote to continue the business.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

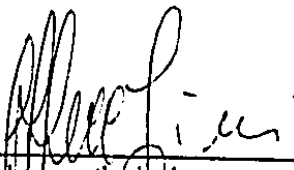
L.C.

The undersigned member or authorized representative of a member of VENEFLOR deposes and says:

- 1) The above named limited liability company has three members.

EURO-AMERICAN DEVELOPMENT, INC.
DECOIN, INC.
RECUPERADORA DE METALES L A MORAN, INC.

- 2) The total amount of cash contributed by the member(s) is \$ 5,000
- 3) If any, the agreed value of property other than cash contributed by member (s) is A description of the property is attached and made a part hereto. \$ 0
- 4) The amount of cash or property anticipated to be contributed by member (s) is \$ 0
- 5) The total amount of 2,3, and 4 is \$ 5,000



Signature of a member or authorized representative of a member.
(In accordance with section 608.408 (3), Florida Statutes, the
execution of this affidavit constitutes an affirmation under the
penalties of perjury that the facts stated herein are true.)

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

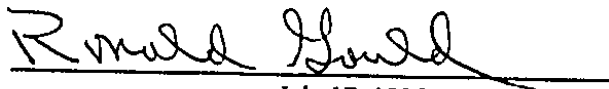
PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **VENEFLO, L.C.**

2. The name and address of the registered agent and office is:

RONALD GOULD
7th Floor 1110 Brickell Avenue, Miami, Florida 33131

Having been named as registered agent and to accept service of process for the 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.


July 17, 1995

FILED
95 JUL 19 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

1996 OCT 24 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION FOR
REINSTATEMENT FOR
LIMITED LIABILITY COMPANY



FLORIDA DEPARTMENT OF STATE
Jon Smith
Secretary of State
DIVISION OF CORPORATIONS

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address
of Limited Liability Company

DOCUMENT # L95000000547

VENEFLO, L.L.C.
15011 S.W. 43RD TERRACE
MIAMI, FLORIDA 33185

1a. Principal Place of Business Address

15011 S.W. 43RD TERRACE
MIAMI, FLORIDA 33185

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2

2. Mailing Address		2a. Principal Place of Business		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07/17/95	FLORIDA
City & State		City & State		4. FET Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Zip		65-0689478	
Country		Country		5. Date of Last Report	6. Certificate of Status Desired
					<input type="checkbox"/> Additional Fee Required

7. Name and Address of Current Registered Agent

GIUSEPPE OTTOLINO
15011 S.W. 43RD TERRACE
MIAMI, FLORIDA 33185

8. Name and Address of New Registered Agent

Name
GIUSEPPE OTTOLINO
Street Address (P.O. Box Number is Not Acceptable)
15011 S.W. 43RD TERRACE
Suite, Apt. #, etc.
City
MIAMI
Zip Code
FL 33185

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Date 10/21/96

REGISTERED AGENT MUST SIGN

10. Title	Managing Members/Managers	Business Street Address	City, State & Zip Code
MEMBER	GIUSEPPE OTTOLINO	15011 S.W. 43RD TERRACE	MIAMI, FLORIDA 33185
MEMBER	YADIRA OTTOLINO	15011 S.W. 43RD TERRACE	MIAMI, FLORIDA 33185

REINSTATEMENT *de la Haza*

700001991367--5
-10/30/96--01134--013
****738.75 ****738.75

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of

Managing Member/Manager

Date

10/21/96

Daytime Phone 205-225-3383

Typed or printed name of signing Managing Member/Manager