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# FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### URIBE WINDOW TREATMENTS LLC

Certificate of Status	0
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J. BRYAN

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



ARTICLE I -

Name: The name of the Limited Liability Company is:

#### URIBE WINDOW TREATMENTS LLC

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

#### ARTICLE II - Address:

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

Principal Office Address: 19400 TURNBERRY WAY APT 42 AVENTURA, FL. 33180 Mailing Address: 19400 TURNBERRY WAY APT 42 AVENTURA FL. 33180

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 registeration.)

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

## ANDRES RODRIGUEZ

Name

150 S.E 2ND AVE SUITE 1110

Floridà street address (P.O. Box NOT acceptable)

MIAMI, FL. 33131 FL City, State, and Zip (((H09000090941)))



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.

.. Registored Agent's Signature (REQUIRED)

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

#### Title:

"MGR" = Manager
"MGRM" = Managing Member

MGR MARIA CLARA URIBE 19400 TURNBERRY WAY APT 42 AVENTURA, FL. 33180

**MGRM** 

(Use attachment if necessary)

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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.)

# MARIA CLARA URIBE Typed or printed name of signee

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SECRETARY OF STATE