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(Req	uestor's Name)	
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Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
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Office Use Only

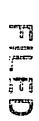


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TALLAHASSEE, FL

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COVER LETTER

Registration Section
Division of Corporations TO:

SUBJECT:	Sanmont Produce LLC		
SUBJECT		Name of Limited Liability Company	-

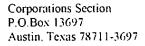
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concern	ning this matter to the f	ollowing:		
Juan Pablo Sanchez M	lontibeller			
	Na	ne of Person		
	Fin	m/Company		
4300 Biscayne Bouley				
		Address		
Miami, Florida 33137				
	City/Sta	te and Zip Code		
jpsanmont@gmail.com				
E-ma	il address: (to be used	for future annual	report noti	fication)
For further information concerning this n	natter, please call:			
Juan Pablo Sanchez Montibelle	er	305 at (7127980	 -
Name of Conta	act Person	Area Code	Dayt	ime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, F1, 32314			Division o Registratio Clifton Bu 2661 Exec	
	ount: 30.00 Filing Fee & ificate of Status	☐ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee. Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION (05/07)2 FLORIDA STATUTES. THE FOLLOWING ISSUBMITTED TO REGISTER A FOREIGN TIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1. Sanmont Produce LLC	Limited Liability Company, must include "Limi	tot I i thilire Cor	nnan "T. L. " oc "H.C")		-
Sanmont LLC	Thinke Change Congany, man mende	ico military city	injurity, it is to a same y		
	same adopted for the purpose of transacting business in F	londa. The alternat	e name must include "Lumied Liab	day Company," "L.L.C," or "LL	.C ~)
5 Texas Secretary of State	c	3, 30	1168179		
(Jurisdiction under the law of w	high foreign himsed hability company is organized)			er. (l'applicable)	•
4.					
	(Date first transacted business in Florida, if prior t (See seeping 605 096) Cold 0905 (5.5) to deter-	o registration.) mine penalty liabili	N)		
5 4300 Biscayne Bouley	ard Suite 203 -	b 430	0 Biscayne Boulevard S	Suite 203	
(Street Address of Principal Office)			(Mailing Additional Salary Additional Control of the Control of th	(35)	-
Miami, Florida 33137		Mi	imi, Florida 33137		-
				- 방: 등	_
				OIB APR	
7. Name and street addres	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> acce	ptable)	* 7	1-1 2220
Name:	Juan Pablo Sanchez Montibeller			-	1
Office Address:	4300 Biscayne Boulevard Suite 203			<u> </u>	11
	Miami		. Horida 33137		
	(Uny)	-	(Zip orde		
to comply with the provis and accept the obligation	tion, I hereby accept the appointment ions of all statutes relative to the propes of my position/as registered agent. (Regineral agent active and address of the person(s) who leaves and Address:	er and complete and complete significant from the control of the c	ete pérformance of my d	luties, and I am famili	ar with
Owner, President & Secretary	Juan Pablo Sanchez Montibeller 4300 Biscayne Bhd. Suite 203, Miami, Florida 33137				
(Use attachments if neces	ssary)				
jurisdiction under the law of the translator must be s 10. This document is ever	outed in accordance with section 605.02 to the Department of State constitutes a	ate is in a for 03/1) (b), Fi	orida Statutes. I am awar orida Statutes. I am awar olony as proyided for in	ion of the certificate ur	ider oath
	Signati	ire of an authorized	i beisou.		
	Juan Pablo Sanchez Montibeller				
	Exped	e saten bennung to i	(states		





Office of the Secretary of State

CERTIFICATE OF FILING OF

Sammont Produce LLC File Number: 803237298

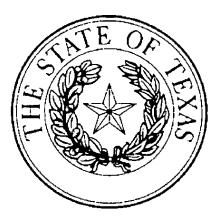
The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Formation for the above named Domestic Limited Liability Company (LLC) has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

The issuance of this certificate does not authorize the use of a name in this state in violation of the rights of another under the federal Trademark Act of 1946, the Texas trademark law, the Assumed Business or Professional Name Act, or the common law.

Dated: 02/13/2019

Effective: 02/13/2019



David Whitley Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/
Phone: (512) 463-5555 Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services
Prepared by: Tamara Schoonmak TID: 10306 Document: 867867120002