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Florida Department of State Division of Corporations Public Access System Katherine Harris, Secretary of State

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To: Division of Corporations Fax Number : (850)922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY Account Number : 072450003255 Phone : (305)541-3694 Fax Number : (305)541-3770

LIMITED LIABILITY COMPANY

XPRESS PAPER, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00



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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 16, 2000

EMPIRE CORPORATE KIT COMPANY

SUBJECT: XPRESS PAPER, LTD. REF: W00000027273

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan Document Specialist FAX Aud. #: H00000060101 Letter Number: 400A00058983

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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EMPIRE CORP

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is Xpress Paper. LLC

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is 654 E, 35* Street, Histeah, Florida 33013.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

Raul Gastesi, Jr. 15600 N.W. 67th Avenue Suite 308 Miami Lakes, FL 33014

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 prided for in Chapter 608, F.S.

Sent's Signature

ARTICLE IV - Management

[X] The Limited Liability Company is to be managed by two managers and is therefore, a manager managed company.

CLXUDE DESC

MANAGER

(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.)

<u>CLAUDE</u>	DESCHAMPS
Printed Name	1

OSVALDO KATAL GOMEZ MANAGER

(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.)

OSVALDO RAUL GOMEZ			ري <u>اين</u>		1
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EPARED BY: RAUL GASTESL JR. GASTESL & ASSOCIATES, P.A. 15600 N.W. 67th AVE, #308 Minti Lakes, FL 33014 Tel: 705-818-0903 FJN 823778

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