# L04000053184

| (Re                     | equestor's Name)   | <del></del> |
|-------------------------|--------------------|-------------|
|                         |                    |             |
| (Ac                     | ldress)            |             |
| (Ac                     | ldress)            | <u> </u>    |
| (Cit                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nar  | ne)         |
| (Dc                     | cument Number)     | <u> </u>    |
| (DC                     | cament Namber)     |             |
| Certified Copies        | _ Certificates     | of Status   |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
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# TRANSMITTAL LETTER

| TO: Registration Section   | -   |
|--|---|
| Division of Corporations   |   |
| SUBJECT: Ameximport Limited Liability Company  (Name of Limited Liability Company) | e w gr  |
| The enclosed Articles of Organization and fee(s) are submitted for filing.         | •   |
| Please return all correspondence concerning this matter to the following:          |   |
| Frederico Vicari Panosso   |   |
| (Name of Person)   |   |
| Ameximport LLC   |   |
| (Firm/Company)   |   |
| 2778 Running Springs Loop  | AH P  |
| (Address)  | 38.5<br>25.5<br>25.5<br>25.5<br>25.5<br>25.5<br>25.5<br>25.5<br>2 |
| Oviedo / Florida 32765   | E FLOR  |
| (City/State and Zip Code)  | 9 <u>7</u> =  |
| For further information concerning this matter, please call:                       | OF A  |
| Frederico V. Panosso <u>at (513 ) 253-8224</u>                                     |   |
| (Name of Person) (Area Code & Daytime Telephone Number)                            |   |

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE II -              | Address  |  |                           |                                       |  |
|---------------------------|--|--|---------------------------|---------------------------------------|--|
|                           |  | of the principal office of   | the Limited Liab          | ility Compan                          |  |
| Principal Office Address: |  | <u>Mailing</u>   | Mailing Address:          |                                       |  |
| 2778 Running Springs Loop |  | 2778 Ru  | 2778 Running Springs Loop |                                       |  |
| Oviedo, FL 32765          |  | Oviedo,  | Oviedo, FL 32765          |                                       |  |
|                           |  |  |                           |                                       |  |
|                           |  |  |                           |                                       |  |
|                           |  |  |                           | · · · · · · · · · · · · · · · · · · · |  |
| ARTICLE III               | - Registered Agent. R  | evistered Office. & Regis  | stered Agent's S          | lionature:                            |  |
|                           | • • •  | egistered Office, & Regists of the registered agent a  | ~                         | signature:                            |  |
|                           | he Florida street addres   | s of the registered agent a  | ~                         | Signature:                            |  |
|                           | • • •  | s of the registered agent a  | ~                         | Signature:                            |  |
|                           | he Florida street addres  Mateus Vicari Panos                      | s of the registered agent a<br>so<br>Name  | ~                         | 7/0                                   |  |
|                           | he Florida street addres  Mateus Vicari Panos  2778 Running Spring | s of the registered agent a so Name ps Loop  | re:<br>                   | 7/0                                   |  |
|                           | he Florida street addres  Mateus Vicari Panos  2778 Running Spring | s of the registered agent a<br>so<br>Name  | re:<br>                   | SECRETAL TALLAHAS                     |  |
|                           | he Florida street addres  Mateus Vicari Panos  2778 Running Spring | s of the registered agent a  so  Name  gs Loop  ddress (P.O. Box NOT accepta                   | re:<br>                   | SECRETARY TALLAHASSE                  |  |
|                           | Mateus Vicari Panos  2778 Running Spring Florida street au         | s of the registered agent at so Name  So Name  So Name  GS Loop  Iddress (P.O. Box NOT accepta | re:                       | 700                                   |  |

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| Title: "MGR" = Manager "MGRAf" = Manager | Name and Address:                        | .,      |          |
|--|--|---------|----------|
| "MGRM" = Managing Member                 |  |         |          |
| MGRM                                     | Jose A. Panosso                          |         |          |
|  | 2656 Euclid Heights Blvd, 303            | . :     |          |
|  | Cleveland Heights, OH 44106              |         | 1        |
| MGRM                                     | Frederico V. Panosso                     |         | a**      |
|  | 2778 Running Springs Loop                | •       |          |
|  | Oviedo, FL 32765                         |         | 1.       |
| MGRM                                     | Mateus V. Panosso                        |         | ine #1   |
|  | 2778 Running Springs Loop                |         |          |
|  | Oviedo, FL 32765                         | 으       |          |
|  | LCALL                                    | 100     | 11       |
|  | (0)                                      | J       | <u> </u> |
| (Use attachment if necessary)            | E. F.                                    | 4:11.14 |          |
| NOTE: An additional auticle and be       | ORIO                                     |         | ١.       |
| NOTE: An additional article must be      | added if an effective date is requested. |         |          |
| 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.)

Mateus V. Panosso

Typed or printed name of signee

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)