

W5000061409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies 1

Certificates of Status 1

Special Instructions to Filing Officer:

6/14

FL LC

EFF 6/8

Office Use Only



600055882766

06/14/05--01016--003 **160.00

M. HODGES

05 JUN 16 PM 3:34

FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PINZON PRODUCE, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joel M. Aresty, Esq.
(Name of Person)

Joel M. Aresty, P.A.
(Firm/Company)

11077 Biscayne Blvd., Penthouse
(Address)

Miami, FL 33161
(City/State and Zip Code)

For further information concerning this matter, please call:

Joel M. Aresty at (305) 899-9876
(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 I - Name:

The name of the Limited Liability Company is:

PINZON PRODUCE, LLC

ARTICLE II - Address:

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

Principal Office Address:

7704 NW 115 Court

Miami, FL 33178

Mailing Address:

7704 NW 115 Court

Miami, FL 33178

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

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

Catalina Pinzon

Name

7704 NW 115 Court

Florida street address (P.O. Box **NOT** acceptable)

Miami, FLORIDA 33178

City, State, and Zip

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, Florida Statutes..

Catalina Pinzon

Registered Agent's Signature

05 JUN 14 PM 2:34
FBI

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

Name and Address:

<u>MGR</u>	Catalina Pinzon 7704 NW 115 Court Miami, FL 33178
<u>MBRM/President</u>	Ariel Pinzon 7704 NW 15 Court Miami, FL 33178
<u>MBRM/Vice President</u>	Alejandro Pinzon 7704 NW 15 court Miami, FL 33178
<u> </u>	<u> </u>
<u> </u>	<u> </u>

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Catalina Pinzon
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.)

Catalina Pinzon
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)

ARTICLE V - Effective Date

The effective date of the formation of PINZON PRODUCE, LLC is June 8, 2005.