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Florida Department of State  
Division of Corporations  
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DORIS

To: Division of Corporations  
Fax Number : (850)205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 NOV 17 AM 10:42

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AND  
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DIVISION OF CORPORATION

## LIMITED LIABILITY COMPANY

LESMAR WAREHOUSING AND DISTRIBUTORS, L.L.C.

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

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ARTICLES OF ORGANIZATION  
OF

Lesmar Warehousing and Distributors, L.L.C.

ARTICLE I B NAME:

The name of the Limited Liability Company shall be  
Lesmar Warehousing and Distributors, L.L.C. (ACompany@).

ARTICLE II B ADDRESS:

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

1598 NW 82<sup>nd</sup> Avenue  
Miami, FL 33126

ARTICLE III B REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT-S SIGNATURE:

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

Doris E Cardelle

\_\_\_\_\_  
Name

10264 SW 127<sup>th</sup> Court

\_\_\_\_\_  
Florida Street address (PO Box NOT acceptable)

Miami, FL 33186

\_\_\_\_\_  
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, F.S..

*Doris E Cardelle*

\_\_\_\_\_  
Registered Agent-s Signature

Prepared by:  
Doris E. Cardelle  
10264 SW 127<sup>th</sup> Court  
Miami, FL 33186  
PH: (305) 385-2469

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TALAHASSEE, FLORIDA

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ARTICLE IV - MANAGEMENT (Check box if applicable):

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

ARTICLE V B EFFECTIVE DATE:

These Articles of Organization shall be effective immediately upon approval of the Secretary of State, State of Florida.

ARTICLE VI B MANAGER(S) OR MANAGING MEMBER(S):

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

Title: Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR/MGRM Eugene W. Malcolm III  
4 Kress Circle, Lancaster, PA 17602

MGR/MGRM Javier Torrens  
1501 Victoria Isle Way, Weston, FL 33327

\_\_\_\_\_  
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).

\_\_\_\_\_  
Javier Torrens

\_\_\_\_\_  
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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