Florida Department of State Division of Corporations

Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000056299 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

FLORIDA/FOREIGN LIMITED LIABILITY CO.

GOMEZ NURSERY LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

Grome.

We- 23032

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

GOMEZ NUR	SERY LLC			
ARTICLE II - Ad The mailing addres is:		of the principal off	ice of the Limited Liability	Company
Principal Office A	<u>lddress:</u>		Malling Address:	
18471 SW 1	04 ST		SAME	
MIAMI, FL	33196			
	egistered Agent, Re		Registered Agent's Signa	
	EDUARDO A.	GOMEZ		,
		Name		하다 (
	18471 SW 10	4 STREET		
	Florida stree	address (P.O. Box No)T acceptable)	
		33196		
	MIAMI, FL	City, State, and Zip Co		

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.

Registered Agent's Signate EDUARDO A. GOMEZ

(CONTINUED)

Page 1 of 2

ARTICLE IV - Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address:

MGRM	BOUARGO A. GOMEZ	
	18471 SW 104 ST	_
	MIAMI, FL 33196	-
MGRM	MARIA E. GOMEZ	_
	18471 SW 104 ST	
	MIAMI, FL 33196	
	J. Co.	Į.
	ا سام است. الميام است.	2
<u> </u>		;
	100 mg - 100	1
	٠٠٠ ب ران سير (i) L
		-
		=
Use attachment is necessary)		
ote: An additional article must be add	ed if an effective/flate is requested.	

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.)

EDUARDO A. GOMEZ

Typed or printed name of signee

Page 2 of 2