# Florida Department of State

### Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 : (305)634-3694 Phone

Fax Number : (305)633-9696

# FLORIDA/FOREIGN LIMITED LIABILITY CO.

### rincon investments llc

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# ARTICLES OF ORGANIZATION OF A FLORIDA LIMITED LIABILITY COMPANY

SECHELLINI SEE, FLI

### ARTICLE I-NAME

The name of the Limited Liability Company is:

### RINCON INVESTMENTS LLC

### ARTICLE H-ADDRESS:

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

### PRINCIPAL OFFICE ADDRESS:

MAILING ADDRESS:

16946 SW 78 TERRACE MIAMI FE 33 193

16346 SW 78 TERRACE MIAMI FL 33193

ARTICLE III- RECISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE: The name and the Florida street address of the registered agent are:

## HAROLD RINCON

16346 SW 78 TERRACE FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE)

> MIAMI FL 33193 CITY, STATE, AND ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS 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 FURTHERAGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFOMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS PROVIDED FOR IN CLAPTER 508. P.S.

REGISTERED AGENT SIGNATURE

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ARTICI	Æ	Įν	-MANACEMENT/MEMBER()	<b>5</b> ):
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The name(s) and address (es) of each Manager or Managing Member is as follows:

Title:

Name and address:

MGR= Manager MGRM= Managing Member

MGRM= HAROLD RINCON, 16346 SW 78 TERRACE, MIAMI FL 33193

MGR= RODRIGO RINCON, 16346 SW 78 TERRACE, MIAMI FL 33193

(Use attachment if necessary)

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

REQUIRED SIGNATURE

BER OR AN AUTHORIZED REPRESENTATIVE OF A MEMBER. SIGNATURE OF A

( In accurdance with section 603.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

HAROLD RINCON

Typed or printed name of signed

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