

L06000080773

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.

(((H06000204656 3)))



H060002046563ABC\$

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

2006 AUG 15 A 10: 25
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

FILED

To: Division of Corporations
Fax Number : (850)205-0383
From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

06 AUG 15 PM 1: 49
DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

xotic cartagena llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

AL

(B)

H06000204656

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY
OF:**

2006 AUG 15 A 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE I - NAME

The name of the Limited Liability Company is:

XOTIC CARTAGENA LLC.

ARTICLE II - ADDRESS:

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

**117 SE 3RD AVE. STE. 9
HALLANDALE, FL 33309**

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

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

**FABIO A. GUZMAN
5590 LAKESIDE DR. #104
MARGATE, FL 33063**

Having been named as registered agent and to accept service of process at for the above stated corporation at the place designated in these Articles of Incorporation, 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.


Registered agents Signature (REQUIRED)

Prepared by:
Firmo Maldonado c/o Regiones Unidas
8010 W. Sample Road
Coral Springs, FL 33065
Phone (954) 344-3555

H06000204656

H06000204656

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

The name and address of each Manager and managing Members is as follows:

**MGR:
FABIO A. GUZMAN
5590 LAKESIDE DR. #104
MARGATE, FL 33063**

**MGR:
OSCAR W. LONGSWORTH JR.
117 SE 3RD AVE. #9
HALLANDALE, FL 33309**

**MGR:
JOHNIE C. STEGALL
1445 ALAMEDA DR.
XENIA, OH 45358**

ARTICLE IV - Effective Date

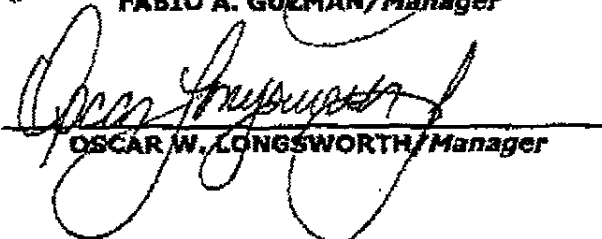
AUGUST 14, 2006

2006 AUG 15 A 10: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FABIO A. GUZMAN / Manager



OSCAR W. LONGSWORTH / Manager

H06000204656