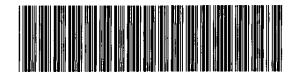
# L08000041060

(Requestor's Name)		
(Address)		
(Address)		
	·	
(Cit	y/State/Zip/Phone	= #)
<b>\</b>	,	- ·· <b>,</b>
PICK-UP	WAIT	MAIL
_		
(5)		\
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
	. ,	
ı		
L		

Office Use Only



700125458477

04/24/08--01007--014 \*\*155.00

DIVISION OF CONFORMIONS
TALL HASSEL FLORIDA

B. KOHR

APR 2 4 2008

**EXAMINER** 

FILED

08 APR 24 PM 3: 30

SECRETARY OF STATE
FALLAHASSEE, FLORING

## LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2100 Walk in Certified Copy Will wait Mail out Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** ■ Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION ☐ Annual Report ☐ Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

CR2E031(7/97)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I – Name:** The name of the Limited Liability Company is:

BAECARS, LLC

#### **ARTICLE II - Address:**

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

#### **Principal Office Address:**

**Mailing Address:** 

11324 NW, 43<sup>rd</sup> Terrace, Doral, FL, 33178.

11324 NW, 43<sup>rd</sup> Terrace Doral, FL, 33178.

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

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

#### **BYRON ALBERTO ESPINOSA**

11324 NW, 43<sup>rd</sup> Terrace Doral, FL 33178

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..

**BYRON ALBERTO ESPINOSA** 

Registered Agent's Signature

(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** 

MONICA DEL SOCORRO FEIJOO

**MGRM** 

BYRON ALBERTO ESPINOZA

#### **REQUIRED SIGNATURE:**

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.)

MONICA DEL SOCORRO FEIJOO

Typed or printed name of signee