

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.

(((H080002493873)))



H080002493873ABC8

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

. SELLEKS

To:

Division of Corporations

Fax Number

: (850)617-6383

NOV - 5 2008

From:

Account Name : ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA, P.A.

Account Number : 076624003440 Phone : (305)444-6226 Fax Number : (305)442-4829

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CELLUCRETE USA, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help SAIE

H08000249387 3

ARTICLES OF ORGANIZATION

<u>QF</u>

CELLUCRETE USA, LLC

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

ARTICLE I NAME

The name of this Limited Liability Company is: CELLUCRETE USA, LLC

ARTICLE II GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV

The principal office and mailing address of this Limited Liability Company in the State of Florida is 11905 N.W. 99th AVENUE, HIALEAH GARDENS, FL, 33018. The Board of Managers may from time to time move the principal office to another address in Florida.

ARTICLE V REGISTERED OFFICE, REGISTERED AGENT

That CELLUCRETE USA, LLC, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates ARAZOZA & FERNANDEZ-FRAGA, P.A., as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134.

новооо249387 3

ARTICLE VI **MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The initial Manager shall be:

> ANTHONY ABREU of 11905 N.W. 99TH AVENUE, HIALEAH GARDENS, FL 33018

WITNESS the hand and seal of the authorized representative of manager in Miami-Dade County, State of Florida, this 4th day of November, 2008.

> Adelaida Fernandez-Fraga Authorized Representative

STATE OF FLORIDA)		
)	SS:	
COUNTY OF MIAMI-DADE)		

PERSONALLY appeared before me, ADELAIDA FERNANDEZ-FRAGA, the authorized representative of the manager of CELLUCRETE USA, LLC, for and on behalf of the entity, who is personally known to me, who being by me first duly sworn, acknowledges that he signed the same for the purposes therein expressed.

WITNESS my hand and seal at Miami-Dade County, Florida this 47 day of November, 2008.

NOTARY PUBLIC-STATE OF FLORIDA Lauta Kohn Commission #DD770888 Expires: MAY 16, 2012 BONDED THRU ATLANTIC BONDING CO., INC.

NOTARY PUBLIC. STATE OF FLORIDA AT LARGE

My commission expires:

H08000249387 3

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That CELLUCRETE USA, LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, has named ARAZOZA & FERNANDEZ-FRAGA, P.A, as its Agent, of 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134, to accept service of process within Florida.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Registered Agent

ADELAIDA FERNAND Managing Director

Arazoza & Fernandez-Fraga, P.A.

Date: November 4th, 2008