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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

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

Fax Number : (305)633-9696

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## progress imports and exports, llc

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EMPIRE CORP KIT

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company	, 15.	
PROGRESS IMPORTS and EXI		
(Must end with the words "Limited L	lability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Li	lability Company is:
Principal Office Address:	Mailing Address:	
8782 S.W. 12 Street, # 207	8782 S.W. 12 Street, # 207	
Mierni, Florida 33174	Mlemi. Florida 33174	
•	togistered Agent. You must designate so indivine registered agent are:	PILE 09 APR 22 AH BECRETARY OF LAHASSEE, F
13899 Biscayne Blvd., # 110		EST SE D
Florida street address (P.O. Box <u>NOT</u> acceptable)		B: 48 STATE LORIDA
N. Miami Beach, FL 33181		<b>B</b>
City, Sta	ate, and Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as r	in this certificate, I hereby accept the acity. I further agree to comply with e performance of my duties, and I as	he appointment as h the provisions of all m familiar with and

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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: "MGR" = Manager "MGRM" = Managing Member MGRM HENRY COMPANIONI 8782 S.W. 12 ST., # 207 MIAMI, FLORIDA 33174 MGRM ANGEL SUN CHEAZ PELAEZ Calle Testro Nactonal, # 403 El Millon, Sto. Domingo, Dominican Republic (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 508.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.) Maria Behar, Esquire Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) H09000096722 Page 2 of 2