

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.

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

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146

Phone : (305) 444-4994 Fax Number : (305)444-4977

FLORIDA/FOREIGN LIMITED LIABILITY CO.

SOUTH AMERICAN HIDES LLC

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

D. BRUCE

JUN 16 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

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https://efile.sunbiz.org/scripts/efilcovr.exe

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850-617-6381



June 15, 2009

FI.ORIDA DEPARTMENT OF STATE

EXPRESS CORPORATE FILING SERVICE DIVISION of Corporations

SUBJECT: SOUTH AMERICAN HIDES LLC REF 5 W09000027804

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on June 12, 2009. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II FAX Aud. #: H09000142271 Letter Number: 809A00020094

O9 JUN 15 AH 6: 31
SECRETARY OF STATE
TALLAHASSEE FISIALE

P.O BOX 6327 - Tallahassee, Flonda 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:

5.u+L AMERICAN HIDES LLC

South American Hides LLC
(Must end with the words "Limited Liability Company," I, L.C.," or "LLC.")

ARTICLE I) - Address:

ARTICLE 1 - Name:

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

Principal Office Address:

Apply H707

Sunuy ISIES FL 33160

Mailing Address:

Mailing Address:

Apply H707

DRIVE #707

Sunuy ISIES FL 33160

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Umited Limbility Company cannot sorve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Name

200 178 D21 JE 14707

Florido street address (P.O. Box NOT acceptable)

Supply Isles II 33160

City, State, and Zip

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 60%, F.S.

Rugistered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

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| Title: "MGR" = Manager "MGRM" = Managing Membe | Name and Address: |
|--|--|
| MGR | FEDERICO GROSSMAN 200 178 DRIVE # 707 SUNNY ISLES, FL 33160 |
| | |
| | |
| | |
| (Use attachment if necessary) FICLE V: Effective date, if other the effective date is listed, the date is 190 days after the date of filing.) | nust be specific and cannot be more than five business days prior |
| <u>REQUIRED</u> SIGNATURE: | |
| Signalare of a | member or an authorized representative of a member. |
| of this docume | with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.) |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
5 30.00 Certified Copy (Optional)
5 5.00 Certificate of Status (Optional)

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Typed or printed name of signoc