

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335 Phone : (305)599-0839

Fax Number : (305)716-0346

# FLORIDA/FOREIGN LIMITED LIABILITY CO.

## INTEGRAL EXPORTATION & IMPORTATION SERVICE, LLC

Certificate of Status	0
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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I- Name:

The name of the Limited Liability Company is:

#### INTEGRAL EXPORTATION & IMPORTATION SERVICE, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or abbreviation "LLC," or "L.C.")

#### ARTICLE II- Address:

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

Principal Office Address:

41 SE 5TH STREET,

MIAMI, FL 33131

Mailing Address:

SAME

# ARTICLE III- Manager(s) or Managing Member(s):

The name and address of each Manager of Managing Member is as follows:

Title

Name and Address:

MGRM

GIUSEPPE ABRUSCI

41 SE 5TH STREET.
MIAMI, FL 33131

MGRM

JOSE MANUEL VELASQUEZ

41 SE 5<sup>TH</sup> STREET MIAMI, FL 33131

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SECRETARY OF STATE
TALLAHASSEE, FLORIB

### ARTICLE IV- Registered Agent, Registered Office & Registered Agent's Signature:

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

SERGIO SALADRIGAS 7220 NW 36 ST. STE. 308 MIAMI, FL 33166

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 certificated, 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 statures 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.

Registered Agent's Signature (Required)

ARTICLE V: Effective date, if other than the date of filing:

(optional)

SIGNATURE:

Signature of a member or an authorized representative of a member.
(In accordance with section 606.498(3), Florida Statutes, the execution that the facts stated herein are true)

<u>Inverse: Abcect</u> Type of printed name of signee.