

FROM : LAZARUS
Division of Corporations

FAX NO. : 3052201440

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Florida Department of State
Division of Corporations
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

SURTITIENDAS, LLC.

Certificate of Status	0
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J. BRYAN

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EXAMINER

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I NAME

The name of the Limited Liability Company is: **SURTITIENDAS, LLC.**

ARTICLE II ADDRESS

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

**10679 NW 123ST-RD
MEDLEY, FL 33178**

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE AND
REGISTERED AGENT'S SIGNATURE**

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

JULIO BARBERI

(NAME)

10983 NW 48 LANE

FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE)

MAMI, FL 33178

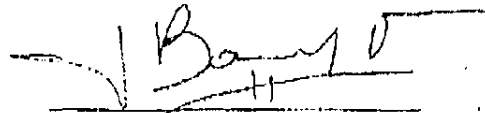
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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. 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 THE CHAPTER 608, F.S.


Registered Agent's Signature**ARTICLE IV MANAGEMENT**

Management of this limited liability company is reserved to its members, whose names and addresses are as follows:

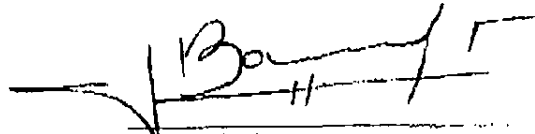
GERMAN DARIO PALACIO
17506 SW 29 CT
MIRAMAR, FL 33029
MANAGER

JULIO BARBERI
10983 NW 48 LANE
MIAMI, FL 33178
MANAGER

Executed by the undersigned members of the limited liability company this: 25TH day of September 2009.



German Dario Palacio.
Authorized Representative.



Julio Barberi
Authorized Representative

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