Florida Department of State

Division of Corporations 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.

(((H100000031813)))



H100000031813ABCO

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 : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

PRECEIVED 10 JAN -6 PH 1: 42 SECHERAL G. STATE ALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

AMERI IMPORT & EXPORT, LLC

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

T. HAMPTON

Electronic Filing Menu

Corporate Filing Menu

EXAMINER

JAN -6 AM 7:56

SECRETARY OF STATE

Help

H10000003181

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CO ARTICLE I - Name: The name of the Limited Liability Community.)MPAN	Y
The name of the Limited Liability Company is: AMERI IMPORT & Export, Lh (Must and with the words "Limited Liability Company, "L.L.C.," or "LLC.")	C	
(Must and with the words "Limited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability C	ompany	is:
Principal Office Address: Mailing Address:		
19248 SW 80 court 19248 SW 80 e	+	
19248 SW 80 COURT 19248 SW 80 e CUTLER BAY CUTIER BAY FLORIDA 38187 FL 33157	 	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature (The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual or and business entity with an active Florida registration.)	ore: other	
The name and the Florida street address of the registered agent are:		
JORGE GARCIA		
y Leastern		
19248 SUE 80 et		
Florida street address (P.O. Box NOT acceptable) Cutler B 44 FL 3 3 1 5 7 City, State, and Zip		
City, State, and Zip		
Having been named as registered agent and to accept service of process for the above stability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the proving statutes relating to the proper and complete performance of my duties, and I am familia.	ument as visions of	^all
accept the obligations of my position as registered agent as provided for in Chapter 6		C.S
(When	10	IISIVII
Registered Ageny's Signature (REQUIRED)	MA	岩部
	9-	
/ .	Ē	
(CONTINUED)	7:	STA
Page 1 of 2	<u>എ</u>	芸芸

H10000003181

ARTICLE IV- Manager(s) or Managing Member(s):

H10000003181

The name and address of each Manag	ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member MGR M	Jonge GARCIA
7779200	19248 SUR 80 Ct Cutler BAY, 76 33157
MGRM	KATHERIVE GLAROID
MG BM	Dariel Vazquez 19248 SW 80 COURT
	Cutler Bay, FL 33157

(Use attachment if necessary)

MGRM

ARTICLE V: Effective date, if other than	the date of filing:	(OPTIONAL)
(If an effective date is listed, the date mus	st be specific and cannot b	e 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 608.408(3), Florida Statutes, the execution of this document constitutes an affurnation under the penalties of perjury that the facts stated herein are tone.)

yped 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)

Page 2 of 2