

JUL 27 12 FR 10:36 PM

Division of Corporations

P. 001

Page 1 of 1

**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.**

(((H10000171086 3)))



H100001710863ABCY

**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

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

Email Address: \_\_\_\_\_

RECEIVED

10 JUL 28 PM 12:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.  
BIXRAY DISTRIBUTOR, LLC**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 JUL 28 AM 11:20

FILED

**G. MCLEOD**  
Electronic Filing Menu Corporate Filing Menu Help  
JUL 29 2010

**EXAMINER**

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

**ARTICLE I - NAME**

The name and address of this Limited Liability Company shall be:

**Bixray Distribution, LLC**

**ARTICLE II - ADDRESS**

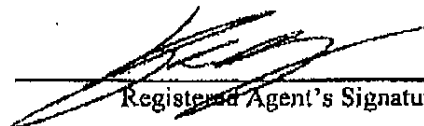
**7000 ISLAND BLVD., UNIT 802  
AVENTURA FL 33160**

**ARTICLE III - NAME OF REGISTERED  
AGENT, ADDRESS OF REGISTERED OFFICE  
AND REGISTERED AGENT'S SIGNATURE**

The name and street address of the L.L.C.'s initial registered resident agent shall be:

**Miguel A. Hernandez  
C/O 8500 WEST FLAGLER STREET  
SUITE B-208  
Miami, FL 33144**

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 608, F.S..

  
\_\_\_\_\_  
Registered Agent's Signature

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 JUL 28 AM 11:20

FILED

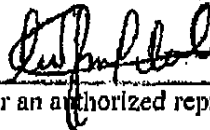
**ARTICLE VII - MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is; therefore, a manager- managed company.

Elisa Ana Cordovez Rodriguez "MGRM" 51%  
7000 ISLAND BLVD., UNIT 802  
AVENTURA FL 33160

Leonardo José Márquez Figueredo "MGRM" 39%  
7000 ISLAND BLVD., UNIT 802  
AVENTURA FL 33160

Marlene C. Rodriguez "Member 10%  
3800 San Simeon Circle,  
Weston, FL 33331.



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 affirmation  
under the penalties of perjury that the facts stated herein are  
true)

Elisa Ana Cordovez Rodriguez  
Printed name of signature