

L11000032113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

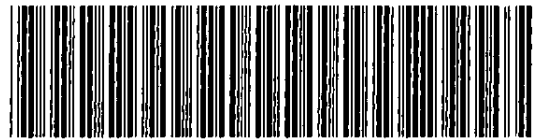
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE

3/18/2011



Empire Toll Free: 1-800-432-3028

3/15/11

ROLANDO E. LEIVA CPA PA

Requester's Name

7400 SW 50 TERR # 302

Address

Miami, FL 33155

City

State

ZIP

Phone

(305) 663-1511

CORPORATION(S) NAME

AVC INTERNATIONAL, LLC

( ) Profit

( ) NonProfit

( ) Amendment

( ) Merger

( ) Foreign

( ) Dissolution

( ) Mark

( ) Limited Partnership

( ) Annual Report

(X) Other LLC

( ) Reinstatement

( ) Reservation

( ) Change of Registered Agent

( ) Certified Copy

( ) Photo Copies

( ) Certificate Under Seal

( ) Call When Ready

( ) Call If Problem

( ) After 4:30

(X) Walk In ( ) Will Wait

(X) Pick Up

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Document

Examiner

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W.P. Verifier

EFFECTIVE DATE 3/18/2011

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAR 16 PM 12:44

Date: February 21, 2011

### ARTICLE I – NAME:

The name of the Limited Liability Company is:

**AVC INTERNATIONAL, LLC**

### ARTICLE II – ADDRESS:

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

3533 NW 115 AVENUE  
DORAL, FLORIDA 33178

### ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

LARA FRANCO

Name

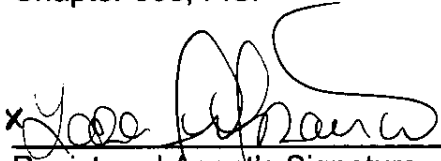
18001 N. BAY ROAD, APT. 502

Florida Street Address

SUNNY ISLES BEACH, FL 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 608, F.S.

  
Registered Agent's Signature

#### **ARTICLE IV – MANAGEMENT**

The Limited Liability Company is to be considered a multiple manager LLC and is therefore a MULTIPLE MANAGER LLC company. The name and address of each initial MANAGER or MANAGING MEMBER are as follows:

**Title:**  
**Manager**

**Name and Address:**  
**NELSON REIS E SILVA**  
**Rua Bruno Hering, 716**  
**Blumenau, Santa Catarina**  
**Brazil, CEP 89036-160**

**Manager**

**FEDERICO BAUSONE**  
**Ave Vasconcelos 131 Ote**  
**Colonia Del Valle, Garza**  
**Gracia, N.L. 66220, Mexico**

**Manager**

**CARLOS ALBERTO DALMARCO**  
**Rua Bruno Hering, 716**  
**Blumenau, Santa Catarina**  
**Brazil, CEP 89036-160**

**Managing Member**

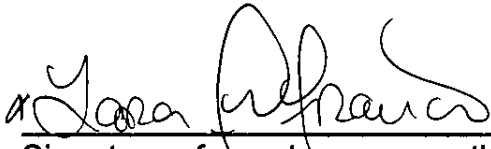
**LARA FRANCO**  
**18001 N. Bay Road, Apt. 502**  
**Sunny Isles Beach, FL 33160**

**ARTICLE V - BUSINESS DEDUCTIONS**

Per IRS regulations the corporation may pay and deduct the health insurance and medical expenses of its directors and employees. Additionally, business auto expenses may be reimbursed to directors and employees and thus deducted from current operations.

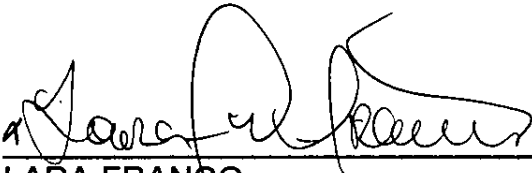
**ARTICLE VI - EFFECTIVE DATE**

The effective date of the Limited Liability Company shall be: *March 18*, 2011.

A handwritten signature in cursive script, appearing to read 'Lara Franco', written over a horizontal line.

Signature of 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

A handwritten signature in cursive script, appearing to read 'Lara Franco', written over a horizontal line.

**LARA FRANCO**  
**Managing Member of LLC**

February 21, 2011