

JUL 06 2011 2:02PM

FLORIDA CORPORATE SERVICES

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

**L. SELLERS**

JUL -7 2011

From:

Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

**EXAMINER**

**\*\*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  
11 JUL -6 PM 3:02  
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**FLORIDA LIMITED LIABILITY CO.  
NATURAL AMERICAN LIFE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 JUL -6 PM 12:34

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

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

NATURAL AMERICAN LIFE LLC

**ARTICLE II ADDRESS**

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

1434 NE 32ND TER

OCALA, FLORIDA 34470

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE**

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

MIGUEL EDUARDO GUARDAMINO

1434 NE 32ND TER

OCALA, FLORIDA 34470

Having been named as registered agent 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..

X MIGUEL E. GUARDAMINO

MIGUEL EDUARDO GUARDAMINO / Registered Agent's signature

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a Manager Managed Company.

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NATURAL AMERICAN LIFE LLC

**ARTICLE V MANAGERS (optional)**

MANAGER:

MIGUEL EDUARDO GUARDAMINO

1434 NE 32ND TER

OCALA, FLORIDA 34470

MANAGER:

KATHERINE VANESSA TINOCO PEREDA

1434 NE 32ND TER

OCALA, FLORIDA 34470

MANAGER:

LINDA ALEJANDRA GUARDAMINO

1434 NE 32ND TER

OCALA, FLORIDA 34470

**ARTICLE VI MEMBERS (optional)**

MEMBER:

MIGUEL EDUARDO GUARDAMINO

1434 NE 32ND TER

OCALA, FLORIDA 34470

MEMBER:

KATHERINE VANESSA TINOCO PEREDA

1434 NE 32ND TER

OCALA, FLORIDA 34470

\*\*\*\*\*

X MIGUEL E. GUARDAMINO:

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.

MIGUEL EDUARDO GUARDAMINO

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