

12/12/2029

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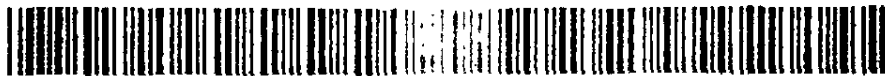
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Page 1 of 1

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.

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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 : 517-6383

From:

Account Name : 1677808 CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : 552-5273
Fax Number : 520-1140

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
DISTRIBUIDORA NANO ELECTRIC LLC.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED

12 JAN 31 AM 10:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 JAN 31 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Electronic Filing Menu Corporate Filing Menu **G. MCLEOD** Help

<https://efile.sunbiz.org/scripts/efilecovr.exe>

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1/31/2012

EXAMINER

12/12/2028 00:13
JAN/30/2012/MON 03:46 PM

FAX No.

#1728 P.002/003
P.005

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Distribuidora Nano Electronic LLC.
(Must end 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 Company is:

Principal Office Address:

Mailing Address:

10868 NW 81 LN.
MIAMI FL 33178

10868 NW 81 LN.
MIAMI FL 33178

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 another business entity with an active Florida registration.)

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

ALFREDO M. GANDICA

10868 NW 81 LN MIAMI FL 33178

Florida's (P.O. Box not acceptable)

FL

City: Zip

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

(Signature)
Registered Agent's

(Signature)
(REQUIRED)

(COPIES)

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

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

MGRM

NATHALIE BETANCOURT

866 NW 81 ST

MIAMI FL 33178

ALFREDO A. GANDICA

866 NW 81 ST

MIAMI FL 33178

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

[Signature]
Signature of a member or authorized representative of a member.

(In accordance with section 607.013, Florida Statutes, the execution of this document constitutes an attestation under the penalties of perjury that the facts stated herein are true.)

Alfredo A. Gandica
Typed name of signatory

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)

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