10006149 03/19/2030 #6220 P.001/003 rage I OLI 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. (((H12000125438 3)))



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To:

Division of Corporations Fax Number : (850)617-6383 EFFECTIVE DATE 05.07.12

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I2000000019 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.

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#6220 P.002/003

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name;

03/19/2030 02:17

The name of the Limited Liability Company is:

QUICK DELIVERY 3C LLC

(Must end with the words "Limited Liebility Company, "LL.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:

2320 EAST PRESERVE WAY APT107 MIRAMAR, FL 33025

2320 EAST PRESERVE WAY APT107 MIRAMAR, FL 33025

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liebility Company cannot serve as its own Registered Agent. Youlmust designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:	12 MAY SECRE
MARIANELLA FERNANDEZ	Trac. 1777
Name	-7 AICI
2320 EAST PRESERVE WAY APT107	EUF AM
Florida street address (P.O. Box NOT acceptable)	FLCS1 7
MIRAMAR, _{FL} 33025	: 26 UATE
City, State, and Zip	A

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 (REQUIRED)

(CONTINUED)

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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:

Name and Address:

"MGR" = Manager "MGRM" = Managing Member

MGR

MGRM

EDUARDO FORTE 2320 EAST PRESERVE WAY APT107 MIRAMAR, FL 33025

MARIANELLA FERNANDEZ

2320 EAST PRESERVE W	AY APT107			
MIRAMAR, FL 33025		A CT		
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>05/07/2012</u>. (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:

UNCINC

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817 [155, F.S.]

MARIANELLA FERNANDEZ

Typed or printed name of signee

Filing Fees:

S125.00 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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