

L12000116354

Florida Department of State
Division of Corporations
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12 SEP 11 AM 10:35
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FLORIDA LIMITED LIABILITY CO.
A&S INVESTMENT COMPANY S.A., LLC.

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

T. CLINE
SEP 12 2012
EXAMINER

H12000223806

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

A&S INVESTMENT COMPANY S.A., 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:

12349 SW 132 CT
MIAMI, FL 33186

Mailing Address:

I-5203
P O Box 025488
Miami FL 33102-6488

FILED
1988 JUL 11 11 58 AM
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF MIAMI
STATE OF FLORIDA

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:

ARTURO JOU-PAM SANG DE AZA

Name

12349 SW 132 CT

Florida street address (P.O. Box NOT acceptable)

MIAMI FL 33186

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 (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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

ARTURO JOU-PAM SANG DE AZA

12349 SW 132 CT

MIAMI, FL 33186

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12 SEP 11 AM 8:21
STATE OF FLORIDA
MIRIAM BECKWITH, CLERK

(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 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.)

ARTURO JOU-PAM SANG DE AZA

Typed or printed name of signer

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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