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Florida Department of State
Division of Corporations
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To:

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

EFFECTIVE DATE

2/8/2013

From:

Account Name : LAZARUS CORPORATE FILING SERVICE
Account Number : I20000000019
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.**

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
ZALUCIA ALL SERVICE, LLC**

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

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H1300003224

EFFECTIVE DATE 2/8/2013

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I:**

The name of the Limited Liability Company is: Zalucia All Service, LLC

ARTICLES II:

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

Principal Office Address: 1920 S.W. 21 Avenue
Miami, Florida 33145

ARTICLE III: Registered Agent, Registered Office, & Registered Agent's Signature:

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

Eda Rivera
460 West 29th Street
Hialeah, Florida 33012

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

H13000032249

H13000070049

ARTICLE V: Effective date if other than the date of filing: February 8, 2013.



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.)

LUCIA SANTIAGO

Typed or printed name of signee

H130000032049