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.

(((H13000194986 3)))



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

: (850)617-6383

From:

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I2000000019

Phone

: (305)552~5973

Fax Number

: (305)220-1440

**Ent							entity email				B
	Εœ	ail	Addre	ss:	 	 	 	 	 	<u>·</u>	•
											2

FLORIDA LIMITED LIABILITY CO. ONE SOURCE GLOBAL TRADING L.L.C.

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

Electronic Filing Menu

Corporate Filing Menu

Help

H13000194986

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIVITED LIABILITY CON	MPANY
ARTICLE I - Name:		,
The name of the Limited Liability Company is:		- As
One Source Subal (Must end with the words "Limited Liability	trading 1.1.C.	ECRETAR LLAHAS
ARTICLE II - Address:		SEE SEE
The mailing address and street address of the pr	incipal office of the Limited Liability Cor	npany is:
Principal Office Address:	Mailing Address:	ORID.
2427 centergate Dr.	2427 Centeraute Dr.	₽
Miramar FL 33025	MITAMOR LL 33005	,
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individual or anoth	
	Ide bot	
Name		
2427 centergate	Dr.	
Florida street add	ress (P.O. Box NOT acceptable)	
M.Am.	FL 33025	
City, State, a	and Zip	
* Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered.	this certificate, I hereby accept the appointmy. I further agree to comply with the provise formance of my duties, and I am familiar	nent as sions of all with and

(CONTINUED) Page 1 of 2

H13000184986

Title: "MGR" = M: "MGRM" = i	anager Managing Member	Name and Address:	3 SEP -
MGRM		dose Luis Aldebot 2427 Centersale Dr. Miami Florida 33025	3 AM II: 36
MGR		Elizabeth Rodriguez 2427 Centergite Dr	36.
(Use attachn	nent if necessary)		
(ctive date, if other than	st be specific and cannot be more than five b	(OPTIONAL) usiness days pri
LEV: Effective date	is listed, the date mu he date of filing.)	•	
LE V: Effective dated days after t	is listed, the date mu he date of filing.) D SIGNATURE:		
LE V: Effective date days after t	D SIGNATURE:	A Dolds Lember of a member	-

Page 2 of 2