#0382 P.001/003



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

From:

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<u>.</u>

Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : 12000000019 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. KENDALL BUY EXPRESS LLC

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



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#0382 P.002/003

## H13000220449

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:



## ARTICLE II - Address:

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

Principal Office Address: .

Mailing Address:

8415 SW 107 AVE # 305 MIAMI, FL, 33173	W	SAME
MIAMI, FL, 33173	-	

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:

NELLY CORCUERA					
Name					
8415 SNI 107 AVE # 305 W					
Florida street address (P.O. Box <u>NOT</u> acceptable)					
MIAMI, FL, 33173					
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.,

Regi (REQUIRED)

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<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	NELLY CORCUERA BAIS GUI IOT AVE # 305W MIAMI FL 33173
MERM	CLAUDIO GARCIA 8415 GNI 107 AVE # 305 VA MIAMI, FL, 33173
<u> </u>	· · · · · · · · · · · · · · · · · · ·

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(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.)

**REOUIRED SIGNA** ÷,

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.)

CLAUDIO GAIZCIA	TA SE	2013	
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