

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print the page number on the cover sheet. Type the fax and phone number (shown below) on the top and bottom of all pages of the document.

(((H13000226858 3)))



H130002268583ABC2

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 : 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.
LAMBOR LLC.**

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

Electronic Filing Menu

Corporate Filing Menu

Help

J. SAULSBERRY
EXAMINER

OCT 14 2012

RECEIVED

13 OCT 11 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 OCT 11 AM 9:27
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

H13000226658

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Lambor 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:4661 NW 93rd ct Doral
Doral FL 33178Mailing Address:4661 NW 93rd Doral ct
Doral FL 33178

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:

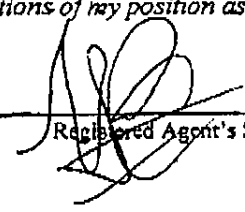
Hernando Lamas

Name

4661 NW 93rd Doral ctFlorida street address (P.O. Box NOT acceptable)Doral, FL, 33178

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)

Page 1 of 2

H13000226658

2013 OCT 11 AM 9:27

H13000226858

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:MgrmHernando Lamas4661 NW 93 Doral ctDoral FL 33128MgrmAlexander Boria4661 NW 93 Doral ctDoral FL 33128

2013 OCT 11 AM 9:27

(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.)

Alexander Boria

Typed or printed name of signee

H13000226858