

#L14000040835

(Requestor's Name)

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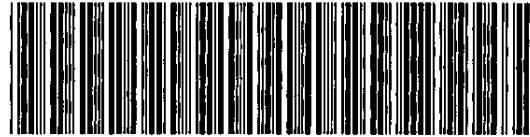
(Business Entity Name)

(Document Number)

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FILED  
2014 MAR 10 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALLY  
EXAMINER  
MAR 11 2014

**Mark S. Matthews**

***Attorney at Law***

Mallory L. Johnson  
Of Counsel

**306 SE Florida Avenue  
Stuart, Florida 34994  
Telephone (772) 287-1000  
Fax (772) 236-8583**

March 6, 2014

Division of Corporation  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

SUBJECT: LATAM IMPORTS, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

[REDACTED]  
[REDACTED]  
[REDACTED]

Mark Matthews, Esq.  
306 S.E. Florida Ave.  
Stuart, FL 34994

e-mail address [lizzyrader@hotmail.com](mailto:lizzyrader@hotmail.com)

For further information concerning this matter, please call:  
Attorney Mark S. Matthews (772)342-2718

Enclosed is a check for the following amount:  
\$160.00 filing fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Very truly yours,

  
Mark S. Matthews, Esq.

**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

FILED  
2014 MAR 10 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability company is:

LATAM IMPORTS, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

3332 SE Court Dr.  
Stuart, FL 34997

**Mailing Address:**

PO Box 2768  
Stuart, FL 34995

**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:

Mark S. Matthews, Esq.  
306 SE Florida Ave.  
Stuart, FL 34994

*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 605, F.S..*

  
Registered Agent's Signature (Required)

#### **ARTICLE IV -**

The name and address of each person authorized to manage and control the Limited Liability Company:

##### **Title:**

##### **Name and Address:**

Authorized Member

Elizabeth Diane Rader  
PO Box 2768  
Stuart, FL 34995

Manager

Beryl Jeannette Rader  
PO Box 2768  
Stuart, FL 34995

The company shall be managed by the members in accordance with regulations adopted by the members for the management of the business and affairs of the Company. These regulations may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The name and address of the authorized member of the company is shown above.

**ARTICLE V:** Effective date is the date of filing.

**ARTICLE VI:** Other provisions, if any.

(A) The general purpose for which the company is organized is to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

(B) Termination of existence: The Company shall be dissolved upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or manager, or upon the occurrence of any other event that terminates the continued membership in the Company, unless the business of the Company is continued by the consent of all the remaining member(s).

**REQUIRED SIGNATURE:**

A handwritten signature in cursive script, appearing to read "Elizabeth Rader", is written over a horizontal line.

Elizabeth Diane Rader

**Signature of a member or an authorized representative of a member.**

(In accordance with section 605.0203(1)(b), 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.)