Florida Department of State

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

From:

Account Name : GEOFFREY M. WAYNE, P.A. Account Number : 076770003401

: (305)381-8108 : (305)381-8109 Phone Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Emil Address: MFPAROGADOMIAMI

FLORIDA LIMITED LIABILITY CO. General Import A&T LLC

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W. Guillegass MAY - 9 2014

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•		
ARTICLE I - Name: The name of the Limited Liability Company is: GENERAL II	MPORT A&T LLC	
ARTICLE II- Address: The mailing address and street address of the principal offi Lorenzo Ave., PH 840, Coral Gables, FL 33146	ce of the Limited Liability Company	<u>}</u>
ARTICLE III - Registered Agent, Registered Office, & Reg	gistered Agent's Signature:	
The name and the Florida street address of the registered as	gent are: ້ຳລັບ ກ່ວ	· · ·
Geoffrey M. Wayne 135 San Lorenzo PH 840 Miamí, Florida 3314	Ave.,	M 7: 59
AMBR/ PS V	e, I hereby accept the appointment accomply with the provisions of all stated I am familiar with and accept the of 605, F.S. Signature	as registered tutes relating obligations of
ARTICLE V - Effective date, if other than the date of filing:		_ ·
ARTICLE IV - Other Provisions, if any.		
Signatule of a member or an authorized (In accordance with section 605.0203 (1) (b), Florida constitutes an affirmation under the penalties of perjuam aware that any false information submitted in a	•	ment rue. I

constitutes a third degree felony as provided for in s.817.155, F.S.)

Geoffrey M. Wayne Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (OPTIONAL)

5.00 Certificate of Status (OPTIONAL)

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