

06/19/14 8:18/20

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Jelen Accounting Services Inc
Division of Corporations

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Florida Department of State
Division of Corporations
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EFFECTIVE DATE

6-19-14

To:

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

From:

Account Name : JELEN ACCOUNTING SERVICES,
Account Number : 120120000052
Phone : (305) 591-9180
Fax Number : (305) 591-9167

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUN 20 PM 3:07

FILED

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

Email Address: jelenaaccountingservices@gmail.com

**FLORIDA LIMITED LIABILITY CO.
PACIFIC ENTERPRISE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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TALLAHASSEE, FLORIDA

06/19/14 05:38PM

Jelen Accounting Services Inc

305-591-9167

p.02

EFFECTIVE DATE

6-19-14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PACIFIC ENTERPRISE, LLC

ARTICLE II - Address:

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

Principal Office Address:

8181 NW 36TH STREET, SUITE 13AB
DORAL, FL. 33166

Mailing Address:

8181 NW 36TH STREET, SUITE 13AB
DORAL, FL. 33166

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

JELEN ACCOUNTING SERVICES, INC.
8181 NW 36TH STREET, SUITE 13AB
DORAL, FL. 33166

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

AMBR

GUILLERMO ESTEBAN FONTANA
8181 NW 36 STREET SUITE 13AB
DORAL, FL. 33166

AMBR

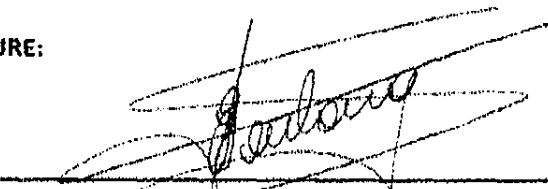
ANDREA ELISABET RAGGIO
8181 NW 36 STREET SUITE 13AB
DORAL, FL. 33166

ARTICLE V: Effective date, if other than the date of filing: June 19, 2014

ARTICLE VI: Purpose

ANY AND ALL LAWFUL BUSINES

REQUIRED SIGNATURE:


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.)

Fontana Guillermo Esteban.
Typed or printed name of signee