L14000106321

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 30, 2014

JOHN STROUT 1747 PENNSYLVANIA AVE. NW SUITE 1000 WASHINGTON, DC 20006

SUBJECT: INTERNATIONAL EXCELLENCE LLC Ref. Number: W14000040496

We have received your document for INTERNATIONAL EXCELLENCE LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt Regulatory Specialist II

Letter Number: 814A00014164

COVER LETTER

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TO: Registration Section Division of Corporations

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SUBJECT:

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

	John Strout					
		Name of	Person			
	Webster, Chamberlain & Bean					
Firm/Company						11
1747 Pennsylvania Avenue, NW, Suite 1000						e Ballonage Erstandage B
	Address				P# 4:	11
	Washington, DC 20006					
		City/State and	d Zip Code			
	JSTROUT@WC-B.COM	e (to be used fi	or future annual repo	rt potification)		
For furth		please call: 202	785-9500			
	Name of Person	Area Code	Daytime Telepl	aone Number		
Enclosed	is a check for the following amount:					
]\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certif	0 Filing Fee & ied Copy al copy is enclosed)	S160.00 Filing Certificate of Certified Copy (additional copy	Status & N	
	<u>Mailing Address</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	uions ner Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

INTERNATIONAL EXCELLENCE LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "L.L.C.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:		
8669 NW 36 St, #130 Miami, FL 33166-6672	8669 NW 36 St, #130 Miami, FL 33166-6672		
another business entity with an active Florida re- The name and the Florida street address of the re-	its own Registered Agent. You must designate an in- gistration.)	2014 JUL -2 PH	
Gesana Villegas			
8669 NW 36 St, #130	je 🕰		
Florida street address (I			
Miami	1/L 33166-6672		
City	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 605, F.S.

Registered Agent's Signature (REQUIRED) By:

(CONTINUED)

Page 1 of 2

ARTICLE IV-

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

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<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager Gesana Villegas MGR/MBR	8669 NW 36 St, #130 Miami, FL 33166-6672	
	8669 NW 36 St, #130 Miami, FL 33166-6672	
	2814	
(Use attachment if necessary)		m D
ARTICLE V: Effective date, if other than the date of filing: [(If an effective date is listed, the date must be specific and	cannot be more than five business days prior to m290 days a	
the date of filing.)		•
ARTICLE VI: Other provisions, if any. The purpose of the Company shall be to engage in bu	siness activitios.	

REQUIRED SIGNATURE:

Sterana Villages

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

(In accordance with section 605.0203 (4) (b). Florida Statutes, the execution of this document constitutes an affirmation under the penaltics 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.)

Gesana Villegas

Typed or printed name of signee

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2