

L14000145642

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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RECEIVED
14 SEP 17 AM 8:50
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICE

**FLORIDA LIMITED LIABILITY CO.
MECHANICAL STOCK, LLC**

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

14 SEP 17 AM 7:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MECHANICAL STOCK, 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:

8260 NW 14 ST

DORAL, FL 33126

Mailing Address:

8260 NW 14 ST

DORAL, FL 33126

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:

JOSE DUNKER

Name

8260 NW 14 ST

Florida street address. (P.O. Box NOT acceptable)

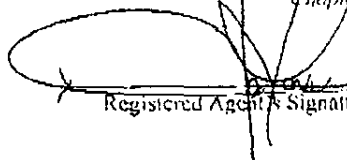
DORAL

FL 33126

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)

(CONTINUED)

14 SEP 17 AM 7:37
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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ARTICLE IV-

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

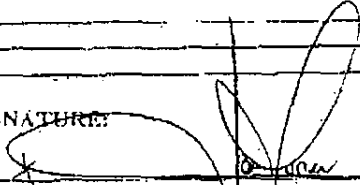
<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	DCS INGENIEROS CALLE LARIMAR #16 URBANIZACION SOLIMAR, SANTO DOMINGO RD.
AMBR	CARLOS RODRIGUEZ CALLE LARIMAR #16 URBANIZACION SOLIMAR, SANTO DOMINGO RD.
AMBR	JOSE DUNKER 8260 NW 14 ST DORAL, FL 33126

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 605.1203(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.)

JOSE DUNKER

Typed or printed name of signee

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TALLAHASSEE FLORIDA

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