

02/02/2033 05:4

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

Email Address: _____

RECEIVED
15 MAR 24 AM 10:00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
MPV GLASS LLC**

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

1 Rush MAR 25 2015

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

MPV Glass LLC

ARTICLE II - Address:

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

11800 NW 100th RD STE 5
Medley, FL 33178

ARTICLE III - Registered Agent, Registered Office:

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

Luis Uribe
11800 NW 100th RD STE 5
Medley, FL 33178

ARTICLE IV-

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

Johan Fernandez (AMBR)

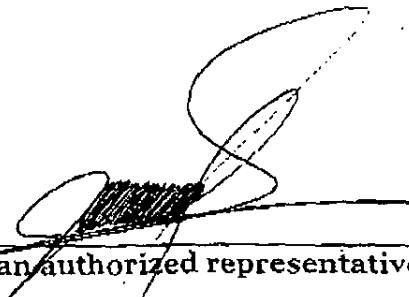
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Required Signatures:


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

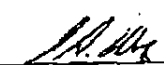
In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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.

JOHAN Fernandez

Typed or printed name of signee

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)

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TALLAHASSEE, FLORIDA