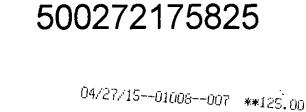
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(Requestor's Name)	
(Address)	<u>,</u>
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of S	Status
Special Instructions to Filing Officer: Mano Pacheco permission to oh the business nan -t 15	anje
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Office Use Only	



EFFECTIVE DATE 4.22-15

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SEGRETARY OF STATE

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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 4, 2015

MARIO A. PACHECO 10418 NE 2ND AVE MIAMI, FL 33138

SUBJECT: MARINE INTERNATIONAL PARTS CORPORATION LLC

Ref. Number: W15000031325

We have received your document for MARINE INTERNATIONAL PARTS CORPORATION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORPORATION." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Terri J Schroeder Regulatory Specialist II

Letter Number: 415A00009122

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Marine Parts International UC Name or 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:
Wario A - Pacheco
International marine parts corporation uc Firm/Company
10418 NE 2nd Ave.
Wiami, FL 33138
City/State and Zip Code markne parts international @ gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Wario A. Pacheco at 305 491-5584 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Sectificate of Status Certified Copy (additional copy is enclosed) \$130.00 Filing Fee Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:						
Marine Parts Ind			or "LL	<u>C.")</u>	_	
ARTICLE II - Address: The mailing address and street address of the princip	pal office of the Lin	nited Liability C	ompan	y is:		
Principal Office Address: 10418 NE 2nd Ave.	Mailing A	ddress: avne .				
Wiami shores, fc 3313	8					
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its another business entity with an active Florida regist	own Registered Ag			e an ind	lividual or	
The name and the Florida street address of the regis		2				
10418 NE Florida street address (P.O	Pay NOT accents	le.				
Miauli Shore City		<u>3313 &</u> 				
City		Zip				
- Whythere	ccept the appointme ions of all statutes r	ent as registered elating to the pro position as regis	agent a per an	ind agre d compl	ee to act in lete perfori	this mana
(CONT	INUED)	; :		2015	423000pg	*'
Page	1 of 2		TARY OF ST	2015 APR 21 Р ц		

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
Manager	Mario A. Pacheco
AMBR"	10418 DE ZNd Ave thrawi FL, 3:
AMISIC	Cristine E. Pacheco 10418 NE Zud Ave. Widui Fc. 33138
 	
(Use attachment if necessary)	
	ルノラフバケ
CLE V: Effective date, if other than the date ffective date is listed, the date must be the of filling.)	ate of filing: 4/22/15 (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after
effective date is listed, the date must be	. (
effective date is listed, the date must be te of filing.)	. (
Effective date is listed, the date must be e of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a signature of	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
REQUIRED SIGNATURE: Signature of a secondaric with section constitutes an affirmation ur I am aware that any false inficonstitutes a third degree fellow.	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.) Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent