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| (Re | questor's Name) | |
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| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| | | |
| (Do | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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SECRETARY OF STATE



144

COVER LETTER

| | egistration ivision of C | Section orporations | | | |
|----------------|-----------------------------|---|-----------------|---|--|
| SUBJECT | BERLIN | TRADE, LLC | | | |
| | · | Name of L | imited Liabil | ity Company | |
| The enclos | ed Articles | of Organization and fee(s) | are submitted | for filing. | |
| Please retu | rn all corres | pondence concerning this r | natter to the f | ollowing: | |
| | Abraham k | Knausel | | | |
| | | | Name of | Person | |
| | Berlin Trac | le, LLC | | | |
| | | | Firm/Co | mpany | |
| | 1852 SW 1 | 55th Ave | | | |
| | | | Addr | ess | |
| | Miami, FL | 33185 | | | |
| | | | City/State and | d Zip Code | |
| ! - | berlintradeus | sa@gmail.com | | | |
| | | E-mail address: (to be use | d for future a | nnual report notificat | ion) |
| For further in | nformation o | oncerning this matter, plea | ise call; | | |
| | Abraham K | | 786 | 2003050 | |
| | Na | · · · · · · · · · · · · · · · · · · · | Area Code | Daytime Telephon | ne Number |
| Enclosed is | a check for | the following amount: | | | |
| \$125.00 Fi | ling Fee | \$130.00 Filing Fee & Certificate of Status | Certific | 0 Filing Fee & ed Copy (1 copy is enclosed) | \$160,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | | O | |

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| A | R | T | C | 1. | F. | ı | _ | N | 9 | me | ٠. |
|---|---|---|---|----|----|---|---|---|---|------|----|
| | | | | _ | _ | | | | ш | **** | |

The name of the Limited Liability Company is:

15 JUN 22 PM 2: 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA

| BERL | JN | TR | ۸D | E. | LL | C |
|------|----|----|----|----|----|---|
| | | | | | | |

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

| ARTICLE II - Address: The mailing address and street ad | dress of the principal o | office of the Lim | ited Liability Company is: | |
|--|--------------------------|------------------------|----------------------------|--------|
| <u>Principa</u> | l Office Address: | | Mailing Ad | dress: |
| 1852 SW 155th Ave | | | 852 SW 155th Ave | |
| Miami, FL 33185 | | <u> </u> | Miami, FL 33185 | |
| another business entity with an ac The name and the Florida street ac | • | d agent are: | | |
| | | Name | | |
| | 1852 SW 155th Ave | | | |
| | Florida street addres | ss (P.O. Box <u>NO</u> | T acceptable) | |
| | Miami | FL | 33185 | |
| | City | State | 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 imperoper 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 Agents Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

| Title: | Name and Addre | _{:ss:} '75 J | UN 22 PM 2: |
|--|---|--|---|
| "AMBR" = Authorized Memb | er | | Lu S: |
| "MGR" = Manager | | SEC | RETARY OF STATE |
| MGR | Abraham D Knau | isel TALLA | HAGGE OF STAT |
| • | <u>1852 SW 155th A</u> | \ve | " " PLORIN |
| | Miami, FL 33185 | <u> </u> | |
| MGR | Maria T Knausel | | |
| | 1852 SW 155th A | Ve | |
| | Miami, FL 33185 | | <u> </u> |
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| EV: Effective date, if other the ective date is listed, the date in filing.) | n the date of filing: July 7th, 2015 ust be specific and cannot be more t | han five business day | ys prior to or 90 c |
| ective date is listed, the date n of filing.) | ust be specific and cannot be more t loes not meet the applicable statutory | han five business day | ys prior to or 90 c |
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| E V: Effective date, if other the ective date is listed, the date in of filing.) the date inserted in this block ment's effective date on the De E VI: Other provisions, if any. REQUIRED SIGNATURE: Signatu (In accordance constitutes and | e of a member 7 am authorized repwith section 665.0203 (1) (b), Florida ffirmation under the penalties of perju | filing requirements, a presentative of a meral Statutes, the execution that the facts state | this date will not be the comment of this document of this document described herein are true. |
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