

JUL 14/2015/TUE 12:44 PM

FAX No.

P. 001

7/9/2015

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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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.****

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**FLORIDA LIMITED LIABILITY CO.
ZAIRA GAMBOA, L.L.C.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

JUL 15 2015

S. GILBERT

JUL/14/2015/TUE 02:44 PM

FAX No.

P. 002

850-617-6381

7/10/2015 4:51:30 PM PAGE 1/001 Fax Server



July 10, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

E-FILE EXPRESS COR.

SUBJECT: ZAIRA GAMBOA, LLC
REF: W15000046657

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The first (ambr) name.,

Please return the corrected original and one copy of 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) 245-6052.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

FAX And. #: H15000167617
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

15 JUL 9 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

ZAIRA GAMBOA, L.L.C.

(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:

8434 TEPIC DRIVE
PARAMOUNT, CA 90723

Mailing Address:

8434 TEPIC DRIVE
PARAMOUNT, CA 90723

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:

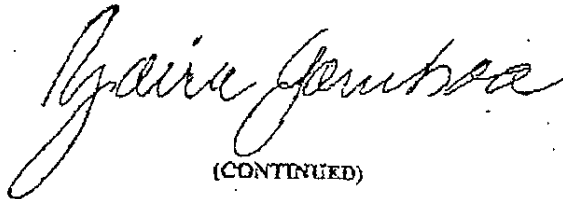
ZAIRA GAMBOA
Name

742 NW 31st AVE
Florida street address (P.O. Box NOT acceptable)

MIAMI FL 33125
City State Zip

FILED
15 JUL 9 PM 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.



(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member
"MGR" = Manager
AMBR

Name and Address:

LIVIER VARGAS
8434 TEPIC DRIVE
PARAMOUNT, CA 90723

AMBR

VICTOR D. POZZO
742 NW 31st AVE
MIAMI, FL 33125

AMBR

ZAIRA GAMBOA
8434 TEPIC DRIVE
PARAMOUNT, CA 90723

(Use attachment if necessary)

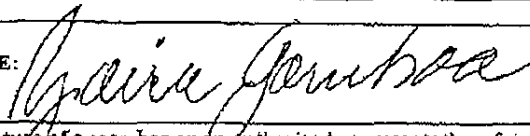
ARTICLE V: Effective date, if other than the date of filing: _____, (OPTIONAL)

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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.)

Zaira Gamboa

Typed or printed name of signer