

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Email Address:

FLORIDA LIMITED LIABILITY CO. SUMINISTRO PETROSUPPLY LLC

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FAX No.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SUMINISTRO PETROSUPPLY 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:

Mailing Address:		
ATH 178		

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:

NORKA BABINO)					
	Name					
1110 BRICKEL A	VENUE SUITE 430					
Florida street address (P.O. Box NOT acceptable)						
MIAMI	FL.	33131				
City	State	Zıp				

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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ARTICLE IV-

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

Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR LUIS ANTONIO FERNANDEZ LEON 8410 NW 114 PATH DORAL, FL 33178 AMBR MARIA ANTONIETA FERNANDEZ ALFARO 8410 NW 114 PATH DORAL, FL 33178 AMBR LEOMARY ALFARO GUZMAN 8410 NW 114 PATH DORAL, FL 33178 LUIS MANUEL FERNANDEZ ALFARO 8410 NW 114 PATH DORAL, FL 33178 (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.)

<u>Note:</u> 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.

REOLIRED SIGNATURE:			
Signature of a member or an authorized representative of a me	mber.		
This document is executed in accordance with section 605.0203 (1) (b),		tatutes.	
I am aware that any false information submitted in a document to the Dep	Samento	f State	
constitutes a third degree felony as provided for in s.817.155, F.S.			
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LUIS ANTONIO FERNANDEZ LEON	E SE		
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