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(Business Entity Name)	03/30/1601017001 **155.00
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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJI	ECT: <u>Island Cuttle Company</u> LCC Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	- Movet Acida
	Name of Person
	Eyner Cop. Filing
	Firm/Company
	1000 Ponce Do Leans Bur 105

Address 31 '5 City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daytime Telephone Number Area Code Name of Person

Enclosed is a check for the following amount:

\$125.00 Filing Fee

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\$130.00 Filing Fee & Certificate of Status

\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

Street Address

\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

New Filing Section Division of Corporations **Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

FAX No.

16 MAR 30 PH 12: 49

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Island Cattle Company, 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:

Principal Office Address:	Mailing Address:
21600 S.W. 152 Avenue	21600 S.W. 152 Avenue
Miami, Florida 33170	Miami, Florida 33170
	· · · · · · · · · · · · · · · · · · ·

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:

Luis A. Castellanos		
	Name	
21600 S.W. 152 Ave	nue	
Florida street addres	is (P.O. Box <u>NOT</u> acc	eptable)
Miami	Florida	33170
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 the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position agrees to agent as provided for in Chapter 605, F.S.

Agent OUIRED' Cegistered Signature

(CONTINUED)

Page 1 of 2

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FAX No.

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager MGR

🔄 MGR

Name and Address:

Luis A. Castellanos 21600 S.W. 152 Avenue Miami, Florida 33170

Isaac Topel 21600 S.W. 152 Avenue Miami. Florida 33170

(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. THIS IS A MANAGER MANAGED LIMITED LIABILITY COMPANY

RECUIRED SIGNATURE:	
Signature of Amember or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.	
Luis A. Castellanos, authorized representative	
Typed or printed name of signee	
Filing Pees;	_
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	C
\$ 30.00 Certified Copy (Optional)	-
\$ 5.00 Certificate of Status (Optional)	5
Page 2 of 2	
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