

04/20/2016 15:00

05201100

LAZARUS

01/03

L1600019519

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000100262 3)))



H160001002623ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
CORPORACION WAL-MIX, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

FILED
16 APR 22 PM 1:34
RECEIVED
16 APR 22 PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

4/25/16

H16000100262
FILED

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

APR 22 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I – Name: The name of the Limited Liability Company is:

Corporacion Wal-Mix, LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

22511 SW 88 Place Unit 9
Cutler Bay, FL 33190

Mailing Address:

22511 SW 88 Place Unit 9
Cutler Bay, FL 33190

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's
Signature:**

The name and the Florida street address of the registered replace agent are replaced:

Luis Granadillo Narvaez

701 Brickell Key Blvd, Apt 1507
Miami, FL 33131

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.

DocuSigned by:

Luis Granadillo

4/21/2016

07EEF2FB590941B...

Registered Agent's Signature

H16000100262

H16000100262

ARTICLE IV – Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGR	LUIS GRANADILLO NARVAEZ
MGR	ALEJANDRO GRANADILLO NARVAEZ
MGR	WILFREDO RODRIGUEZ GOMEZ

REQUIRED SIGNATURE:

DocuSigned by:
Luis Granadillo
07EEF2FB590941D...

4/21/2016

**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.)

Luis Granadillo Narvaez

Typed or printed name of signee

FILED
16 APR 22 PM 1:34
CLERK OF DISTRICT COURT
JANUARY 1, 2017

H16000100262