61600130539

(Re	equestor's Name)	
(Ad	dress)	<u> </u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
(Cir	grotaterziph hone	, n _j
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1

Office Use Only

JUN 2 8 2016 T. SCOTT



600287093056

06/20/16--01014--006 **125.00

16 JUN 20 AMII: 10

COVER LETTER

10;	Division of Corporations		
	Perfarm LLC		
SUBJE		mited Liability Company	
The enc	closed Articles of Organization and fee(s) are	re submitted for filing.	
Please r	return all correspondence concerning this ma	atter to the following:	
	Luiz Roberto Queiroz de Abreu Sodré		
		Name of Person	
	Perfarm LLC		
		Firm/Company	
	17280 Boca Club Blvd #2205		
		Address	
	Boca Raton, FL 33487		
	C luiz.sodre@perfarm.com	City/State and Zip Code	
	E-mail address: (to be used	l for future annual report notification)	
For furthe	ner information concerning this matter, please	e call:	
		5459427	
		Area Code Daytime Telephone Number	
Enclose	ed is a check for the following amount:		
\$125.00	00 Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	d)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	Name: ne Limited Liability Company is:	
Per	farm LLC	
	(Must end with the words "Limited Liability Con	mpany, "L.L.C.," or "LLC.")
ARTICLE II	- Address: Idress and street address of the principal office of the L	mited Liability Company is:
	Principal Office Address:	Mailing Address:

	
17280 Boca Club Blvd #2205	17280 Boca Club Blvd #2205
Boca Raton, FL 33487	Boca Raton, FL 33487
	4

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:

Luiz Roberto Queiro	z de Abreu Sodre	
	Name	
17280 Boca Club Bl	vd #2205	
Florida street addres	s (P.O. Box NOT ac	cceptable)
Boca Raton	FL	33487
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 as registered agent as provided for in Chapter 605, F.S..

Registered Agent's/Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Citle:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	Luiz Roberto Queiroz de Abreu Sodre
	17280 Boca Club Blvd #2205
	Boca Raton, FL 33487
	
CV: Effective date, if other than the date ctive date is listed, the date must be speffiling.)	of filing: (OPTIONAL) exific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the date ective date is listed, the date must be sport filing.) the date inserted in this block does not ment's effective date on the Department of	ecific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will no
ective date is listed, the date must be spo of filing.)	ecific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will no
EV: Effective date, if other than the date ective date is listed, the date must be spend filing.) The date inserted in this block does not rement's effective date on the Department of EVI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will not of State's records.
E V: Effective date, if other than the date ective date is listed, the date must be specifiling.) The date inserted in this block does not ment's effective date on the Department of E VI: Other provisions, if any. REQUIRED SIGNATURE:	neet the applicable statutory filing requirements, this date will not of State's records. The property of the statutory filing requirements and the state will not of state's records.
E V: Effective date, if other than the date extive date is listed, the date must be sport filing.) the date inserted in this block does not ment's effective date on the Department of E VI: Other provisions, if any. REQUIRED SIGNATURE:	neet the applicable statutory filing requirements, this date will not of State's records. The property of the statutory filing requirements and the state will not of state's records.
E V: Effective date, if other than the date extive date is listed, the date must be spoof filing.) the date inserted in this block does not ment's effective date on the Department of E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a ment of the document is executed any layse	ecific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will not of State's records.
EV: Effective date, if other than the date ective date is listed, the date must be specifiling.) The date inserted in this block does not ment's effective date on the Department of EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a ment of the document is executed a man aware that any fasse constitutes a third degree	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
E V: Effective date, if other than the date ective date is listed, the date must be specifiling.) The date inserted in this block does not ment's effective date on the Department of E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me This document is exceptive and aware that any fasse constitutes a third degree	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.

Perfarm LLC 17280 Boca Club Blvd #2205 Boca Raton, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of Perfarm LLC:

Luiz Roberto Queiroz de Abreu Sodré 17280 Boca Club Blvd #2205 Boca Raton, FL 33487

Luiz Roberto Queiroz de Abreu Sodré, Organizer Date