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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

MAY 1 0 2017

K. Brumbley

AUTORIZACION

Por medio de la presente autorizo a BLINTRONAR ARMORING AND TRUCKING LLC Y/O GONZALO AREVALO, para realizar los trámites necesarios de constitución de empresa LLc. En Estado de la Florida USA, Cuyos nombres sugeridos son:

- 1.- OSORIO MOTORS USA, LLC.
- 2.- XAIPION MOTORS
- 3.-BROWARD MOTORS.

ESCOGER EL QUE ESTE DISPONIBLE Y EFECTUAR LAS FIRMAS ELECTRONICAS REQUERIDAS EN MI NOMBRE, PARA LLEVAR A CABO TAL COMISION. SE REALIZA Y AUTORIZA LO ANTERIOR SIN COACCION DE NINGUN TIPO Y CON LA LIBRE ACCION Y CONSENTIMIENTO DE LOS OTORGANTES DE LA CITADA EMPRESA.

Miami, 03/16/2017

Ignacio Osorio

AUTHORIZATION

Hereby authorize BLINTRONAR ARMORING AND TRUCKING LLC, and/or. Gonzalo Arevalo, to carry out the necessary procedures of Constitution of Company LLC, in State of Florida USA, suggested names are:

- 1.-OSORIO MOTORS USA, LLC.
- 2.-XAIPION MOTORS
- 3.-BROWARD MOTOR.

Choose the one available and carry out required on my behalf electronic signatures, to carry out such Commission is performed and authorizes the above without coercion of any kind and with the free action and the licensors of the company cosentimiento.

Miami, 03/16/2017

Ignacio Osorio

To:

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS.

Miami, 04/27/2017.

AUTHORIZATION

Dear Sirs.

I, IGNACIO OSORIO, undersigned, hereby authorize Mr. Gonzalo Arèvalo, to sign and perform the necessary procedures to incorporate and register under the laws of the State of Florida: OSORIO MOTORS USA, LLC.

Sincerely.

Ignacio Oforio.

COVER LETTER

TO:	New Filing Section Division of Corporations
SUBJE	Osorio Motors USA, LLC
30000	Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Gonzalo Arevalo
	Name of Person
	Blintronar Armoring & Trucking LLC
	Firm/Company
	8285NW 64th ST # 6
	Address
	Miami, Florida, 33166
	City/State and Zip Code oficinaseis@hotmail.com
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	Ignacio Osorio 954 5401396
	Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
] \$125.0	O Filing Fee \$\bigsup \text{\$130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)
	Mailing Address Street 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OSORIO MOTORS					
(Must cont	tain the words "Limited	Liability Con	ipany, "L.L.C.	," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	address of the principal of	office of the L	imited Liabilit	y Company is:	
<u>Princip</u>	nal Office Address:			Mailing Address	:
5211SW 9th St, Plan	ntation Florida, 33317		8285NW, 64	4th St # 6, Miami Flo	rida. 33166
·			<u> </u>		
					
ARTICLE III - Registered Ag (The Limited Liability Company					dual or
another business entity with an				J	
The name and the Florida street	address of the registere	d agent are:			17 SEC
	Gonzalo Arevalo				
	Consult Private	Name			-8
					CT1 ~ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
	8285NW 64th St # 6	5			Mo z IT
	8285NW 64th St # 6 Florida street addre		NOT acceptab	le)	E POR BOUT
			NOT acceptab	le)	
	Florida street addre	ss (P.O. Box)		le)	
Having been named as registered place designated in this certificate further agree to comply with the p am familiar with and accept the o	Florida street addre Miami City agent and to accept sere, I hereby accept the approvisions of all statutes	FI. State vice of process pointment as r relating to the	33166 for the above egistered agen proper and co	Zip stated limited liability t and agree to act in t mplete performance o	company at the his capacity. I of my duties, and I
place designated in this certificate	Florida street addre Miami City agent and to accept sere, I hereby accept the approvisions of all statutes	FI. State vice of process pointment as r relating to the	33166 for the above egistered agen proper and co	Zip stated limited liability t and agree to act in t mplete performance o	company at the his capacity. I of my duties, and I

(CONTINUED)

Title: "AMBR" = Authorized Member		Name and Address:			
"MGR" = Manager MGR Ignacio Osorio		5211SW 9th St. Plantation Fl, 33317			
<u>A</u>	MGR, Jose I Osorio	5211SW 9th St. Plantation Fl, 33317			
_					
_					
·	Jse attachment if necessary)				
ARTICLE (If an effecthe date of Note: If the	V: Effective date, if other than the date of filing: tive date is listed, the date must be specific and filing.) ne date inserted in this block does not meet the	: (OPTIONAL) d cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as			
ARTICLE (If an effective date of Note: If the documents)	V: Effective date, if other than the date of filing tive date is listed, the date must be specific and filing.)	applicable statutory filing requirements, this date will not be listed as			
ARTICLE (If an effecthe date of Note: If the document of the ARTICLE	V: Effective date, if other than the date of filing: tive date is listed, the date must be specific and filing.) ne date inserted in this block does not meet the aent's effective date on the Department of State'	applicable statutory filing requirements, this date will not be listed as			

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-