

L170000171318

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.

((H17000212550 3)))



H170002125503ABCX

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 : CLARA GIRALDO, P.A.
Account Number : I19990000017
Phone : (305)485-9300
Fax Number : (305)485-1098

****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.
ALDI FRESH PRODUCE, LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

FILED
17 AUG 10 AM 8:32
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

RECEIVED
17 AUG 10 PM 4:52
FLORIDA DEPARTMENT OF STATE
BUREAU OF COMMERCIAL
INFORMATION SERVICES

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

ALDI FRESH PRODUCE, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

ALDI FRESH PRODUCE, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**11740 SW 107 LANE
MIAMI, FL 33186**

The mailing address shall be:

**11740 SW 107 LANE
MIAMI, FL 33186**

FILED
17 AUG 10 AM 8:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

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

DIEGO ARAGON

11740 SW 107 LANE

Florida Street address (P.O.BOX NOT acceptable)

MIAMI, FL 33186

City, State, and Zip

**CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300**

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

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.


DIEGO ARAGON
11740 SW 107 LANE
MIAMI, FL 33186

MANAGER

LUIS ALBERTO JURADO
11740 SW 107 LANE
MIAMI, FL 33186

MANAGER

(An additional article must be added if an effective date is requested)


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.)

DIEGO ARAGON
Typed or printed name of signee

CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300