Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. ALFREDO IZAGUIRRE LLC.

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

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AUG 2 8 2017

ARTICLE I - Name:
The fiame of the Limited Liability Company is: (Must end with the words "Limited Liability Company,
ALTREDO IZAQUIRRE LLC.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 8400 Nw 33rd S4
Suite 102 Doral +L 33MZ
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability with an active Florida registration.)
▲
AUTREDO JESUS Izaguiral Canucí
2400 NW. 33rd St Suite 102
Doral FL 33122
ARTICLE IV- The name and title of each person authorized to manage and control the Limited Liability Company:
Alfredo Jesus Izaguirre Caruci (AIMBR)

Required Signatures:

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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. 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.

THESO TRAGUIRME

Typed or printed name of signee

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

Registered Agent's Signature (REQUIRED)