

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

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FLORIDA LIMITED LIABILITY CO.
DISTRIBUTOR DIPESCA LLC

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

2ND REQUEST

850-817-6381

10/26/2017 10:43:02 AM PAGE 1/001 Fax Server



October 26, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: DISTRIBUTOR DIPESCA LLC
REF: W17000085698

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Neysa Culligan
Regulatory Specialist II

FAX Aud. #: H17000281738
Letter Number: 317A00021629

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: *(Adjust end with the words "Limited Liability Company," "LLC," or "LLC")*

Distributor Dipesca LLC

ARTICLE II - Address:

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

7178 NW 103rd Path
Doral, FL 33178

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: *(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.)*

Jaena Rodriguez
7178 NW 103rd Path
Doral, FL 33178

ARTICLE IV-

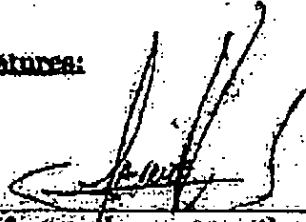
The name and title of each person authorized to manage and control the Limited Liability Company:

Jaime Rodriguez Salazar
Managing Member

Jairo Rodriguez Salazar
Managing Member

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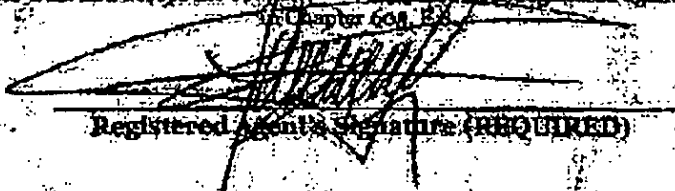
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Required Signatures:**Signature of a member or an authorized representative of a member.**

In accordance with section 605.0203 (4) (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.

Jaime Rodriguez Salazar**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 in Chapter 605, F.S.

**Registered Agent's Signature (REQUIRED)**

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