

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L17000240430

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.

((H17000307280 3)))



H170003072803ABC

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****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.
LEON ROJO PRODUCTION, LLC**

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

17 NOV 21 PM 11:48
FILED

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 22 2017

K. Brumbley

H17000307280

+

ARTICLES OF ORGANIZATION

OF:

LEON ROJO PRODUCTION, LLC

The undersigned, desiring to form a limited liability company under and pursuant to Florida Statute entitled the Florida Limited Liability Company Act, does hereby adopt the following Articles of Organization for such Company:

ARTICLE I - NAME

The name of the limited liability company shall be:

LEON ROJO PRODUCTION, LLC

ARTICLE II - BUSINESS ADDRESS

9800 S W 104 ST
Miami, FL 33176

ARTICLE III - MAILING ADDRESS

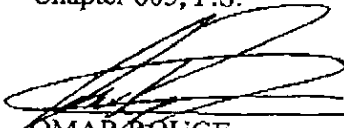
9800 S W 104 ST
Miami, FL 33176

ARTICLE IV - REGISTERED AGENT

OMAR ROUGE

9800 S W 104 ST
Miami, FL 33176

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.


OMAR ROUGE
Registered Agent

H17000307280

H17000307280

ARTICLE V - MANAGEMENT

The name and address of each Manager or Managing Member is as follows:

OMAR ROUGE
9800 S W 104 ST
Miami, FL 33176


OMAR ROUGE
Managing Member

In accordance with section 605.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the Fact State herein are true.

STATE OF FLORIDA
COUNTY OF DADE

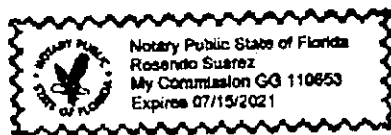
I HEREBY CERTIFY, THAT ON THIS 21th DAY OF November 2017 personally appeared before me, an authorized officer duly commissioned to administer oaths and take acknowledgments;

OMAR ROUGE

The person who executed the foregoing Articles of Organization, and acknowledged that they signed and executed the same for the uses and purposes there in stated.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal in Miami Dade County, Florida. The day and year above written.

Produced Florida Drivers License




NOTARY PUBLIC

H17000307280