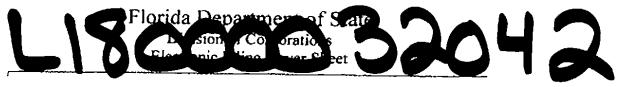
Division of Corporations

Page | of 2



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(((H18000042340 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : COGENCY GLOBAL, INC.

Account Number : 120000000088

Phone : (800)221-0102

Fax Number : (800)944-6607

Email Address:

FLORIDA LIMITED LIABILITY CO.

FerraTex Distribution Co., LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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K. Brumbley

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2/5/2018

From:

02/06/2018 18:13 #870 P.001/004

850-617-6381

2/6/2018 11:49:45 AM PAGE 1/001 Fax Sorver



February 6, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

COGENCY GLOBAL

SUBJECT: FERRATEX DISTRIBUTION CO., LLC

REF: W18000011768

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.

The name of the entity cannot include "CO." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist II

FAX Aud. #: H18000042340 Letter Number: 318A00002447 From:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	FERRATEX	DISTRIBUTION	ON, LLC		
(Must con	tain the words "Limited Liabilit	y Company, 'L.L.	C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street a	ddress of the principal office of	the Limited Liabi	ity Company is:		
Princip	al Office Address:		Mailing Address:		
	Magnum Drive		senhower Parkway, Plaza 1		
Fon Piero	ce, Florida 34981		Livingston, NJ 07039 c/o William Black		•
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an a	ent, Registered Office, & Register cannot serve as its own Register cative Florida registration.)	stered Agent's Signed Agent. You m	c/o William Black	18 FES -6	
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an a	ent, Registered Office, & Register cannot serve as its own Registeration.) active Florida registration.)	stered Agent's Signed Agent. You m	c/o William Black	FE8 -6	י
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an a	ent, Registered Office, & Register cannot serve as its own Registeration.) active Florida registration.)	istered Agent's Signed Agent. You make	c/o William Black	FEB-6 AM	
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an a	ent, Registered Office, & Registration of the registration.) address of the registered agent a COGENCY Name	istered Agent's Signed Agent. You make	c/o William Black guature: ust designate an individual or	FE8 -6	ř
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an a	ent, Registered Office, & Registration of the registration.) address of the registered agent a COGENCY Name	istered Agent's Shered Agent. You make: Y GLOBAL INC.	c/o William Black pusture: ust designate an individual or	FEB-6 AM	È
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an a	ent, Registered Office, & Register cannot serve as its own Registeration.) address of the registered agent of COGENCY Name	istered Agent's Shered Agent. You make: Y GLOBAL INC.	c/o William Black pusture: ust designate an individual or	FEB-6 AM	È

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 fumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

- CHLOURINE ALMOODA ASSI'S ECROPARY Registered Agent's Signature (REQUIRED)

(CONTINUED)

From:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager Emil J. Sofimine AMES €	354 Elsenhower Parkway, Plaza 1
	Livingston, NJ 07039
-	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must I the date of filing.)	date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days after
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must I the date of filing.)	be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must I the date of filing.) Note: If the date inserted in this block does the document's effective date on the Departr ARTICLE VI: Other provisions, if any.	to specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must I the date of filing.) Note: If the date inserted in this block does the document's effective date on the Departr ARTICLE VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as nent of State's records.
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ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must the date of filing.) Note: If the date inserted in this block does the document's effective date on the Departr ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of this document is exil am aware that any constitutes a third de	wille J Warp a member or an authorized representative of a member. a member or an authorized representative of a member. a member or an authorized in a document to the Department of State.

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
5 30.00 Certified Copy (Optional)
5 5.00 Certificate of Status (Optional)