

Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
AQUIPET LOSS CONTROL LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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MAR 20 2018

K. Brumbley

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Aquipet Loss Control LLC
 (Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1110 Brickell Ave #805
Miami, FL 33131

1110 Brickell Ave #805
Miami, FL 33131

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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.)

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

Myriam Gonzalez PA
 Name

999 Ponce de Leon Blvd #705
 Florida street address (P.O. Box NOT acceptable)

Coral Gables FL 33134
 City Zip

Having been appointed 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.

Myriam Gonzalez
 Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMGR" = Authorized Member

"MGR" = Manager

Name and Address:

MGRCampa Elias Paez Maal
110 Brickell Ave #805
Miami, FL 33131MGRJorge Enrique Paez
110 Brickell Ave #805
Miami, FL 33131

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any:

Any and all lawful business purposes

REQUIRED SIGNATURE

Campa Elias Paez MaalSignature 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.)Campa Elias Paez Maal

Typed or printed name of signer