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## COVER LETTER

	ew Filing Section ivision of Corporations				
SUBJECT	Pedmar, LLC				
SUBJECT		f Limited Liabili	ty Company		
The enclos	ed Articles of Organization and feets	s) are submitted	for filing.		
Please retu	rn all correspondence concerning thi	s matter to the fe	ollowing:		
	Lourdes D. Ermer, Esq.				
	Name of Person				
	Dergan Ermer Law, PA				
	Firm/Company				
	7900 Harbor Island Drive, No. 713				
	Address				
	North Bay Village, FL 33141				
	City/State and Zip Code Yogirentals@gmail.com				
-	E-mail address: (to be t	used for future a	nnual report notification)		
For further in	nformation concerning this matter, p	lease call:			
	Lourdes Ermer	305 U(	213-4124		
	Nume of Person	Area Code	Daytime Telephone Number		
Enclosed is	s a check for the following amount:				
\$125.00 Fi	ling Fee S130,00 Filing Fee & Certificate of Status	; └──Certific	0 Filing Fee & \$\ \text{S160.00 Filing Fee,} \\ d Copy & Certificate of Status & \\ d copy is enclosed) Certified Copy (additional copy is enclosed)		
	Mailing Address New Filing Section	·	Street Address New Filing Section		
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Corporations Clifton Building 2664 Executive Center Circle		

Tallahassee, FL 32301

## ADTECLES OF ODG ANIZATION FOR BY ODDING HARDED LIABILITY CYMADANY

<u> </u>	Pedmar, LLC	-
	(Must contain the words "Limited Liability Con	mpany, "L.L.C.," or "L.E.C.")
	II - Address: address and street address of the principal office of the I	Limited Liability Company is:
	Principal Office Address:	Mailing Address:
	45 West 17th Street, Hialcah, FL 33010	
		_
_		
(The Limited	III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Registered Liness entity with an active Florida registration.)	

Lourdes D. Ermer, Esq. Name 7900 Harbor Island Drive, No. 713 Florida street address (P.O. Box NOT acceptable)

North Bay Village, FL 33141 City

State

Zip

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 agencies provided for in Chapter 605, F.S.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)



Title: "AMBR" = Authorized	Name and Addres Member	isi.
"MGR" = Manager MGR/AMBR	Maritza Hernande 45 West 17th Stree	
	Hialeah, FL 33010	
		···
(Use attachment if neces	sary)	
(If an effective date is listed, the the date of filing.) <u>Note:</u> If the date inserted in this	•	, (OPTIONAL) an five business days prior to or 90 days after iling requirements, this date will not be listed as
ARTICLE VI: Other provisions, i This is a Manager managed LLC	fany.	
This do Lam aw constitu	JRE:  Laife Learney  gnature of a member or an authorized repr  rument is executed in accordance with section  are that any talse information submitted in a d  tes a third degree telony as provided for in s.8  faritza Hernandez	n 605.0203 (1) (b), Florida Statutes, ocument to the Department of State
<u>-</u>	Typed or printed name of s	ignee

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)