

LI800028309SS

Florida Department of State  
Division of Corporations  
Electronic Filing Office

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.

((H18000283486 3)))



H180002834863ABCT

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 : (856)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.  
SAP EXPERTS GROUP, LLC.

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

2nd REQUEST

Electronic Filing Menu

Corporate Filing Menu

Help

FILED  
18 OCT - 1 AM 3:30  
SECRETARY OF STATE  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

**-ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY  
COMPANY  
OF  
SAP EXPERTS GROUP, LLC.**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

**SAP EXPERTS GROUP, LLC**

**ARTICLE II - Address**

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

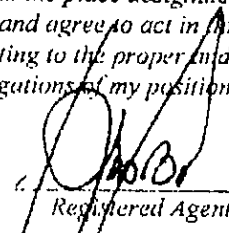
**1280 West 63<sup>rd</sup> Street  
Hialeah, FL 33012**

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

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

**DINO ROBERTO BARRETO CONTRERAS  
1280 WEST 63<sup>RD</sup> STREET  
HIALEAH, FL 33012**

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

  
Registered Agent's Signature

**ARTICLE IV - Management (Check box if applicable)**

(x) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

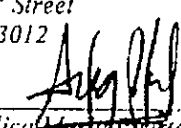
**DINO ROBERTO BARRETO CONTRERAS  
AMBR**

**1280 West 63<sup>rd</sup> Street  
Hialeah, FL 33012**

  
Dino Roberto Barreto Contreras

**ANGELICA MARIA PUERTAS VERGARA  
AMBR**

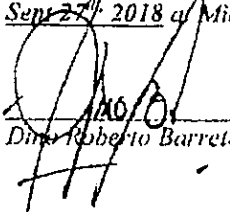
**1280 West 63<sup>rd</sup> Street  
Hialeah, FL 33012**

  
Angelica Maria Puertas Vergara

FILED  
18 OCT -1 AM 039  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

IN WITNESS WHEREOF, the undersigned has hereunto set their hands and seal this Sept 27<sup>th</sup> 2018 at Miami, FL US.

  
Dino Roberto Barreto Contreras

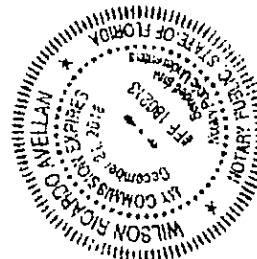
  
Angelica Maria Puertas Vergara

STATE OF FLORIDA  
COUNTY OF DADE

Sworn and subscribed before me, this 27<sup>th</sup> of September of 2018, at Miami, FL by Mr. Dino Roberto Barreto Contreras and Angelica Maria Puertas Vergara, who are known to me and presented their Colombian Passport No. AS277403 and AP789936 respectively as identification.

  
Notary Public - State of Florida

My Commission Expires:



FILED  
18 OCT -1 AM 039  
SECRETARY OF STATE  
TAMMARTIN, FL 33101