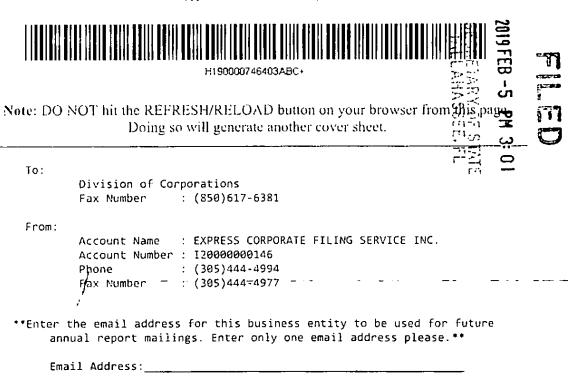
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Division of Corporations Electronic Filing Cover Sheet

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.

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FLORIDA LIMITED LIABILITY CO. METALMAX EXCHANGE LLC

C RICO FEB - 5 2019

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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Corporate Filing Menu

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<u>AFFIDAVIT</u>

BEFORE ME, the undersigned authority, on this day personally appeared JOSE L. HERNANDEZ SANTANA, who after being firstly duly sworn, under oath, deposes and says:

- The undersigned is also the sole Director and the President of METALMAX

 EXCHANGE LLC a Florida corporation to be filed with the Florida Department of

 State on or about January 05, 2010.
- The undersigned hereby consents to and authorizes the use by the name METALMAX
 EXCHANGE LLC.
- 3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstaiting the dissolved entity.

FURTHER AFFLANT SAYETH NAUGHT.

Jose L. Hernandez Santana

STATE OF FLORIDA

SS:

COUNTY OF MIAMI-DADE)

PERSONALLY appeared before me, Jose L Hernandez Santana, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 05th day of February, 2019

LISSET FERNANDEZ
MY COMMISSION #CGG145879
EXPIRES: 100 22, 2020
Baroad Graugh 1st Sisse familiados

Notary Public Signature

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILLTY COMPANY

METALMAX EXCHANGE LLC		
(Must contain the words "Limi	ited Liability Company, "L.L.C.," or "L1,C.")	<u> </u>
TCLE II - Address:		midee
nailing address and street address of the princip	nal office of the Limited Liability Company is:	FER FER
Principal Office Address:	21.00	<u> 新</u>
	Mailing Address:	AS
10773 NW 58TH ST STE 215	SAME AS PRINCIPAL ADDRESS	_紹유 📮
MIAMI, FL 33178		<u>بن</u> ب

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

HERNANDEZ SA	NTANA, JOSE L	
	Name	
10773 NW 58TH S	T STE 215	
Florida street addr	ess (P.O. Box <u>NOT</u> ac	rceptable)
MIAMI	Fl.	33178
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 agent as provided for in Chapter 605. F.S..

(CONTINUED)

Register of Agent's Signature (REQUIRED)

(Use attachment if necessary) ICLE V: Effective date, if other than the date of filing: 02/05/2019 (OPTIONAL) offective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after attention of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed becoment's effective date on the Department of State's records. ICLE VI: Other provisions, if any.	Title: "AMBR" = Authorized Member	Same and Address:	
(Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (OPTIONAL) (OPTIONAL) (OPTIONAL) (If the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed-locument's effective date on the Department of State's records.	"MGR" = Manager AMBR	JOSE I. HERNANDEZ SANTANA	
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Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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 \$.817.155, F.S.	CLE V: Effective date, if other than the date of effective date is listed, the date must be specifie of filing.) If the date inserted in this block does not mee becoment's effective date on the Department of the CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb This document is executed I am aware that any false interests.	it and cannot be more than five business days prior to or 90 at the applicable statutory filing requirements, this date will-not-State's records. Deer or an authorized representative of a member, in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the December of Statutes.	

Filing Fees:

\$ 30.00 Certificate of Status (Optional)