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.

(((H19000107359 3)))



H190001073593ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:			- 4	. <u>-</u> -
	Division of Co		9	
	Fax Number	: (850)617-6381	r.	APR
From:			SS }} SS =2:	1
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	∵π ⊸:	_
	Account Number	: I20000000019	·	>
	Phone	: (305)552-5973	7	
	Fax Number	: (305)675-5944	ာဆို	Ċ
		•	32.2	=
				COS.
•Enter	the email addres:	s for this business entity to be used for	future	
anı	nual report maili	ngs. Enter only one email address please,	h .	
		·		
	sil Address:			

FLORIDA LIMITED LIABILITY CO. BELLITA BAKERY LLC.

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

APR - 2 2019

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - I The name of the	Name: ne Limited Lia	bility Comp	any is:	•		19 A	
	LITA			LLC.		PR - 1 E MASSE HASSE	
ARTICLE II - The mailing ac Company is:	Address.				ne Limited I	iability =	C.
12150	5W	132 C	7			60	
SUITE	214	3 min	mi F	7 33	186		
8750 5	w 2170	FRARO	MIAN	, 17	3314	55	
ARTICLE III - The name and the Company cannot serve with an active Florida ROLAN	ne Fionda str as its own Register	eet address ed Agens. You mu	Of the register of designate an indi	iouti or another	business entity		
8757	5ω	21	TerrA	CE.			
M1,	AMI	PZ.	33/	65			
ARTICLE IV The name and t Liability Compa	itle of each per	rson author AMBR)	ized to manag	e and contr	ol the Limit		<u> </u>
		•					
-							 -

Required Signatures:

Signature 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.

ROLANDO S. ECHECHARIA GONZALEZ

Typed or printed name of signee

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..

Registered Agent's Signature (REQUIRED)