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CORPORATE ACCESS, _

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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		(CORPORATE NAME AND DOCUME	VT #)				<u></u>
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SPE	ECIA	L INSTRUCTIONS:	- <u></u> -	<u> </u>			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Lial				
	RRERO GROUP, LLC ontain the words "Limited Li		"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stree				
<u>Prin</u>	cipal Office Address:	Mailing Address:		
11361 NW 32 MNR		113	11361 NW 32 MNR	
Sunrise, FL 3.	3323	Sur	nrise, FL 33323	
Sunrise, FL 3. ARTICLE III - Registered /	Agent, Registered Office, & any cannot serve as its own R in active Florida registration	Registered Agent. '		
ARTICLE III - Registered another business entity with a	Agent, Registered Office, & any cannot serve as its own R in active Florida registration	Registered Agent. Segistered A	nt's Signature:	
ARTICLE III - Registered another business entity with a	Agent, Registered Office, & any cannot serve as its own R in active Florida registration et address of the registered a Roxana Tumbaco	Registered Agent. Segistered A	nt's Signature:	
ARTICLE III - Registered another business entity with a	Agent, Registered Office, & any cannot serve as its own R in active Florida registration et address of the registered a Roxana Tumbaco	Registered Agent. Surgent arc:	nt's Signature:	
ARTICLE III - Registered another business entity with a	Agent, Registered Office, & any cannot serve as its own R in active Florida registration et address of the registered a Roxana Tumbaco	Registered Agent. S) agent are: Name	nt's Signature: You must designate an individual or	
ARTICLE III - Registered another business entity with a	Agent, Registered Office, & any cannot serve as its own R in active Florida registration et address of the registered a Roxana Tumbaco	Registered Agent. S) agent are: Name	nt's Signature: You must designate an individual or	

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 or registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REOTHRED)

(CONTINUED)

TALLAHASSAF STATE

ARTICLE IV- The name and address of each	person authorized to manage and control the Limited Liability Company:
Title: "AMBR" = Authorized Membe	Name and Address:
"MGR" = Manager MGR	Jaime Patino Calleias
	11361 NW 32 MNR Sunrise, FL 33323
<u>MGR</u>	Jaime Patino Borrero 11361 NW 32 MNR
MGR	Sunrise, FL 33323 Maria Alejandra Calderon
	11361 NW 32 MNR Sunrise, FL 33323
(Use attachment if necessary)	
(If an effective date is listed, the date m the date of filing.)	n the date of filing: (OPTIONAL) sust be specific and cannot be more than five business days prior to or 90 days after does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	0
I am aware that	is executed in accordance with section 605.0203 (1) (b), Florida Statutes. any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.
Aman	da J. Beren Typed or printed name of signee
	Filing Ross

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)