

6/20/2019

Division of Corporations

**L19000154853**

CLARA GIRALDO P.A.  
4080 S.W. 84 AVENUE SUITE C  
MIAMI, FL 33155  
Tel: (305) 485-9300

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Email Address: gerencia@campoferf.com

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**FLORIDA LIMITED LIABILITY CO.  
CAMPOFERT USA LLC**

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
OF**

**CAMPOFERT USA, LLC**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**CAMPOFERT USA, LLC**

**ARTICLE II - ADDRESS**

The principal office of the Limited Liability Company is:

**761 NW TREEMONT AVE  
PORT ST. LUCIE, FL. 34983**

The mailing address shall be:

**761 NW TREEMONT AVE  
PORT ST. LUCIE, FL. 34983**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:**

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

**CARLOS A. BEDOYA GRANOBLES**

**761 NW TREEMONT AVE  
Florida Street address (P.O. BOX NOT acceptable)  
PORT ST. LUCIE, FL. 34983  
City, State, and Zip**

**CLARA GIRALDO E.A.  
4080 SW 84 AVENUE SUITE C  
MIAMI, FL 33155  
PH: (305) 485-9300**

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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**

#### ARTICLE IV- MANAGEMENT

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

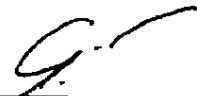
**CARLOS A. BEDOYA GRANOBLES**  
761 NW TREEMONT AVE  
PORT ST. LUCIE, FL. 34983

**MANAGER**

**ANGELICA LOPEZ PRETEL**  
761 NW TREEMONT AVE  
PORT ST. LUCIE, FL. 34983

**MANAGER**

(An additional article must be added if an effective date is requested)

  
\_\_\_\_\_  
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.)

**CARLOS A. BEDOYA GRANOBLES**  
Typed or printed name of signer

**CLARA GIRALDO E.A.**  
4080 SW 84 AVENUE SUITE C  
MIAMI, FL 33155  
PH.: (305) 485-9300