

Division of Corporations Electronic Filing Cover Sheet

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	Division of Corporations			
	Fax Number	: (850)617-6381		
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	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	20	
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FLORIDA LIMITED LIABILITY CO. INVERSIONES 7516910 LLC.

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: (Must and with the words "Limited Liability Company, SECRETARY OF INVERSIONES ALLAHASSEE, 7516910 LLC.

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:

4902 Vision Ave, Holiday, Florida, 34690

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Liability Company cunnot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florido registration.)

Vision Ave, Holiday, Florida, 34690 4902 Faruk Richani Gutierrez

<u>ARTICLE IV-</u>

The name and title of each person authorized to manage and control the Limited Liability Company:

FARUK RICHANI GUTLERREZ - (MGR)

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LAZARUS CORPORATE

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Required Signatures:

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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.

FARUK RICHANI GUTTERRE7

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 us provided for in Chapter 605, F.S..

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Registered Agent's Signature (REQUIRED)

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