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| (Requestor's Name) | | | | | |
|--|----------------|-----------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| ☐ PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer | | | | | |
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12905 SW 42 STREET Suite: 210 MIAMI, FL 33175 Phone: 305-444-4994

Email: filing@ecfsfiling.com

| Office Use | Only | | |
|------------|------|--|--|
| | | | |

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

| | Construction | / | | |
|------------------------|---------------|---------------|-----------------------|--|
| (CORPORAT | | 000 | COMENT #) | |
| (CORPORATE NAME) | | (DOC | (DOCUMENT #) | |
| 3. (CORPORAT | E NAME) | (000 | CUMENT #) | |
| ☐ Walk-In New Filings | Pick up time: | | Certificate Of Status | |
| · | | dments | Other Filings | |
| Profit | Amendme | ents | Annual Report | |
| Non-Profit | Resignati | on | Fictitious Name | |
| X Limited Liability | Dissolution | on/Withdrawal | Apostille: | |
| Other: | Other: | | | |
| | | | Other: | |

Examiners Initials

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ARTICLES OF ORGANIZATION SECRETARY OF STATE OF AXE CONSTRUCTION, LLC

ARTICLE I

The name of the limited liability company is AXE CONSTRUCTION, LLC

ARTICLE II

The address of the principal office and the mailing address of the limited liability company is:

92 SW 3rd St. Unit 4808 Miami, FL 33130

ARTICLE III

The purpose for which this Limited Liability Company is organized is any and all lawful business.

ARTICLE IV

The name and the Florida street address of the registered agent of the limited liability company is:

Iker Guerra Ibarra 92 SW 3rd St. Unit 4808 Miami, FL 33130

Having been named as the 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.

Date: 11/22/2019

Iker Guerra Ibarra

Registered Agent's Signature

ARTICLE V

The name and address of each person authorized to management and control the Limited Liability Company:

Title:

Name and Address:

Manager

Iker Guerra Ibarra 92 SW 3rd St. Unit 4808 Miami, FL 33130

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.

Authorized Signee:

Iker Guerra Ibarra

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