a	Division d'Corporation Electronic Thirry Cover Sheet
Not	e: 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.
	(((H20000026292 3)))
· .	
No	te: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
	To: Division of Corporations Fax Number : (858)617-6381
	From: Account Name : EXPRESS CORPORATE FILING SERVICE INC. Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)444-4977
**	Enter the email address for this business entity to be used for future y_{ad} annual report mailings. Enter only one email address please.**
	FLORIDA LIMITED LIABILITY CO. AMAZON WORLD AMERICA LLC
	Certificate of Status 0 Certified Copy 0 Page Count 03 Estimated Charge \$125.00
	Estimated Charge \$125.00

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AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

To:

The name of the Limited Liability Company is:

AMAZON WORLD AMERICA LLC

(Must constin the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE H - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

City

Principal Office Address:	Mailing Address:
20900 NE 30 AVE AVENTURA, FL 33180	SAME

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

 DANTEL PANTOJA CORREA

 Name

 20900 NE 30 AVE

 Florida street address (P.O. Box <u>NOT</u> acceptable)

 AVENTURA

 FL

 33180

Zip

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)

State

(CONTINUED)

1020 JAN 23 PM 1: 19 TETU

ARTICLE IV-

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	DANIEL PANTOJA CORREA 20900 NE 30 AVE AVENTURA, FL 33180
AMBR	VINICIUS BRASIL FELIPE 20000 NE 30 AVE AVENTURA, FL 33180
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: _______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

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REOFIRE	DISIGNATURE:
	Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statute 1 am aware that any false information submitted in a document to the Department of Stat constitutes a third degree felony as provided for in s.817.155, F.S.
	DANIEL PANTOJA CORREA
	Typed or printed name of signee
	Filing Vees:
\$125.00 Fi	ling Fee for Articles of Organization and Designation of Registered Agent
	ertified Copy (Optional)
S 5.00 C	ertificate of Status (Optional)