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Account Number : 1200000000019 Phone : (305)552-5973 : (305)675-5944

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FLORIDA LIMITED LIABILITY CO. GASTROEX, LLC

Certificate of Status 0 Certified Copy 03 Page Count \$130.00 Estimated Charge

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Corporate Filing Menu

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

0

The name of the Limited Liability Company is:

GASTROEX, LLC

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

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
1346 SW 65 AVE	1346 SW 65 AVE	
W. MIAMI, FL 33144	W. MIAMI, FL 33144	

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:

ROMER E. PINA C		
	Name	
1346 SW 65 AVE		
Florida street addr	ess (P.O. Box <u>NOT</u> ac	ceptable)
W. MIAMI	FL	33144
City	State	7in

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 (Signature (REQUIRED)

(CONTINUED)

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SECRETIFIED FLORIDA

ARTICLE [1	٧	
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The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	DOMED C. DOM. O
	ROMER E, PINA O. 1346 SW 65 AVE
	W. MIAMI, FL 33144
	77. Wilder, 7 E 33 144
MGR	JUAN C. VERA
	9030 SW 28th ST
	MIAMI, FL 33165
1100	
MGR	<u>W. JAB</u> OUR
	926 NW 106 AVE CIR
	MIAMI, FL 33172
(Use attachment if necessary)	
(Obe directiment it necessary)	
many markets and that make be suffer.	f filing: 05/21/2020 (OPTIONAL) ific and cannot be more than five business days prior to or 90 days after
Note: If the date inserted in this block does not me	et the applicable statutory filing requirements, this date will not be listed a
the document's effective date on the Department of	State's records
ARTICLE VI: Other provisions, if any.	
ANY AND ALL LAWFUL BUSINESS	$\overline{}$
	
BEOVERDE GLOVE	1 W Se
REQUIRED SIGNATURE:	
×	ber or an authorized expresentative of a member.
Signature of a mem	ber or an authorized epresentative of a member.
Time document is executed	IN SCOMBING SAMPAGETION 605 0202 (1) (b) Tradida Garage.
I am aware that any false in	formation submitted in a document to the Department of State clony as provided for in s.817.155, F.S.
constitutes a third degree fe	nony as provided for in s.817.155, F.S.
<u>05/21/2020</u> f-c	DWAY E. CINIA O.
	Evned or printed name of circus