~-	Division of Corporations Electronic Filing Cover Sheet	•
	Note: 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.	
	(((H20000257431 3)))	
-	Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.	ر ج ۱
	To: Division of Corporations Fax Number : (850)617-6381	
	From: Account Name : EXPRESS CORPORATE FILING SERVICE INC. Account Number : 120000000146 Phone : (305)444-4994 Fax Number : (305)444-4977	ŗ
	<pre>**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**</pre>	
	Email Address:	
6: 27	FLORIDA LIMITED LIABILITY CO.	- 2020 AUG
FILED 20 AUG - 3 PH 6	Certified Copy 1	-3 PM 7:08
20		ŝ

https://efile.sunbiz.org/scripts/efilcovr.exe

٠

:

## ARTICLES OF ORGANIZATION

# <u>OF</u>

# **AUTOPARTES MARKET LLC**

### ARTICLE I

The name of the limited liability company is AUTOPARTES MARKET LLC

#### ARTICLE II

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

5760 La Luneta Avenue Miami, FL 33155

### 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:

ARAGON REGISTERED AGENTS, INC. 255 Alhambra Circle Suite 500 Coral Gables, FL 33134

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: 8/3/2020

~ ,

5

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

Jorge A. Garcia Tunon 5760 La Luncta Avenue Miami, FL 33155

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:

JORGE A. GARCIA TUNON