Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

3052201440

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

F	Address:			
rma i i	MOORPSS:			

FLORIDA LIMITED LIABILITY CO.

world wide trading international logistics llc

Certificate of Status	1
Certified Copy	0
Page Count	0.4
Estimated Charge	\$130.00

Florida Department of State

Attention: New Filings Section

FILED
2020 AUG 21 PM 4: 01

To whom it may concern:

This is to advise that the owners of

are the same owners of the attached articles. We have dissolved the company and have no intention of reopening it.

Thank you for your help in this matter.

Thanks,

MARCELO J. VESA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

(Must contain the words "Limited Liabi		<u> </u>	2020	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			AUG 2	
Principal Office Address:	Mailing Address:	1) (V)	— Р	
2365 NW 70 AVENUE	2365 NW 70 AVENUE	Ξ,	_	ī
C-05	C-05	• .	Ξ.	
MIAMI, FL. 33122	MIAMI, FL. 33122		0	

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:

MARCELO J. VEG	Α	
—···	Name	
2365 NW 70 AVEN	IUE, C-05	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
MIAMI	FL	33122
City	State	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)

(CONTINUED)

A	D7	TC:	1 1	CE	w

The name and address of each person authorized to	manage and control the Limited Liability Company
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<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	MARCELO J VEGA
	2365 NW 70 AVENUE, C-05
	MIAMI. FL, 33122
MBRM	SERGIO O LUCERO
	SERGIO O LUCERO 2365 NW 70 AVENUE. C-05
	MIAMI. FL. 33122
AMBR	TERMINDA M. DANG DANG
TWIDIC	FERNANDO M. RUIZ DIAZ 2365 NW 70 AVENUE, C-05
	MIAMI. FL. 33122
(II an effective date is listed, the date must be s the date of filing.)	te of filing: AUGUST 16, 2020 (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as it of State's records.
ļ	
ARTICLE VI: Other provisions, if any.	
ARTICLE VI: Other provisions, if any.	acla (Lea
ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	seelo Ligo nember or an authorized representative of a member.

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.

MARCELO J VEGA

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)