

L20090340804

Florida Department of State

Division of Corporations

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

2020 NOV -5 PM 12:05
STATE

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

Double A Solution Appliances & Services LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

2020 NOV -5 PM 1:09
STATE

J. FASON

NOV 06 2020

Electronic Filing Menu

Corporate Filing Menu

Help

H20000384130

ARTICLES OF ORGANIZATION

Article I. Name

The name of this Florida limited liability company is:
Double A Solution Appliances & Services LLC

Article II. Address

The street address of the Company's initial principal office is:
Double A Solution Appliances & Services LLC
8600 NW 56th ST Unit 5
Doral FL 33166

The mailing address of the Company's initial principal office is:
Double A Solution Appliances & Services LLC
8600 NW 56th ST Unit 5
Doral FL 33166

Article III. Registered Agent

The name and street address of the Company's registered agent is:
Worldwide Corporate Administrators LLC
2330 Ponce De Leon Blvd
Coral Gables FL 33134

Article IV. Transferability of Membership Interests

No members shall have the right to assign their membership interests in the Company without the written agreement of all of the membership interests, unless otherwise provided in the Company's Operating Agreement. If the assignment is not approved by all of the membership interests, the assignee shall have no right to become a member, to participate in the management of the Company, or to exercise any other rights or powers of a member. The assignee shall merely be entitled to receive the share of profits and other distributions and the allocation of income, gain, loss deduction, credit or similar item to which the assignor was entitled, to the extent assigned.

Corporate Creations International
801 US Highway 1
North Palm Beach FL 33408
(561) 694-8107

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Article V. Distribution of Profits

Unless otherwise provided in the Company's Operating Agreement, there shall not be any distribution of profits unless each separate distribution is approved by the affirmative vote of members who own more than 50% of the voting interest in the Company. The voting members shall have complete discretion on when and if to approve any distribution of profits.

Article VI. Management

This will be a manager-managed company. The name and address of each manager is:

Angel Rafael Casanova Lezama
8600 NW 56th ST Unit 5
Doral FL 33166

Angel Domingo Casanova Ciaccia
8600 NW 56th ST Unit 5
Doral FL 33166

Article VII. Company Existence

The Company's existence shall begin effective as of November 5, 2020.

The undersigned authorized representative of a member executed these Articles of Organization on 11/5/2020.



CORPORATE CREATIONS INTERNATIONAL
Michael Reinhold Vice President
Joseph Panholzer, Attorney-in-Fact

Corporate Creations International
801 US Highway 1
North Palm Beach FL 33408
(561) 694-8107

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STATEMENT OF REGISTERED AGENT

LIMITED LIABILITY COMPANY:

Double A Solution Appliances & Services LLC

REGISTERED AGENT/OFFICE:

Worldwide Corporate Administrators LLC

2330 Ponce De Leon Blvd

Coral Gables FL 33134

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.



WORLDWIDE CORPORATE ADMINISTRATORS LLC

Joseph Panholzer, Attorney-in-Fact

Date: November 5, 2020.

FILED
2020 NOV -5 PM 12:05
CLERK OF DISTRICT COURT
STATE OF FLORIDA

Corporate Creations International
801 US Highway 1
North Palm Beach FL 33408
(561) 694-8107

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To: 18506176381 From: 12147128131 Date: 11/05/20 Time: 12:10 PM Page: 01/04

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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : I20180000011
Phone : (844)386-0178
Fax Number : (214)317-4754

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Zoutt International LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

2020 NOV -5 PM 3:32

FOR
RECEIPT
ONLY

To: 18506176381 From: 12147128131 Date: 11/05/20 Time: 12:10 PM Page: 02/04
To: 12143174754 From: Restricted Date: 11/05/20 Time: 7:29 AM Page: 01
850-617-6381 11/5/2020 10:29:55 AM PAGE 1/001 Fax Server



November 5, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LEGALINC INTERNATIONAL LLC

SUBJECT: ZOUTT INTERNATIONAL LLC
REF: W20000127630

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity and other information must be composed or comprised solely of letters, numerals, characters, or symbols found on a standard American or U.S. qwerty keyboard. Please amend the document accordingly.

The name for the one manager is the one with the issue.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Lillie S Kervin
Regulatory Specialist II

FAX Aud. #: H20000383243
Letter Number: 220A00022154

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Zoutt International 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:

1221 Brickell Ave Suite 900
Miami, FL 33131

1221 Brickell Ave Suite 900
Miami, FL 33131

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:

Legalinc Corporate Services Inc.

Name

5237 SUMMERLIN COMMONS BLVD, SUITE 400

Florida street address (P.O. Box **NOT** acceptable)

<u>FORT MYERS</u>	<u>FL</u>	<u>33907</u>
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)

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ARTICLE IV-

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:

MGR

Helio Vassao Nespoli

10360 County Road 740, Lot 16, Princeton TX, 75407

(Use attachment if necessary)

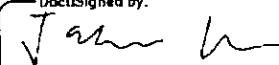
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

Note: 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.

REQUIRED SIGNATURE:

DocuSigned by:

76505FCBDF854E3

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Jackson Hwu

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)

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