Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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Email Address:_

FLORIDA LIMITED LIABILITY CO. **EXCLUSIVE MOVEMENTS, LLC**

Certificate of Status	1
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Corporate Filing Menu

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FIT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1 Derry and 1			
ARTICLE I - Name:			
The name of the Limited Links			
The name of the Limited Liability Company is:			
From Strada 1			
CACUSIVE MI NEMENTS // D			
Exclusive Movements, CCC.			
124 I L. L. M. II a Address.	- -		
The mailing address and street address to			
The mailing address and street address of the principal office of the Limited Lia Company is:	hë të		
	nmth		
380 NW 60CT			
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A 4 2 - 2 - 2 - 2			
Miam; FL 33126	-		-
T 104 -11 C 001C()			
	-		_
ARTICLE III - Registered Agent, Registered Office:			=
The name and about Agent, Registered Office:			
Commerce and the Florida street address of the registered agent			
The name and the Florida street address of the registered agent are: (The Limite. I Liah with an active Florida registration.)	lity		
of matter registration.)			
Albarda T.			
Alberto Jose Fernandez			
380 NW 60 ct			
CPU NW GO GT			
1 dia TI -		·	
Miami FL 33122			
JULION			
ARTICLE IV			
The state of the s			
and title of each person authorized to manage and			
The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)			
۸ ،			
Alberto Jose Fernandez AMBR			
- TIME IT SWETTER INNINZ AMBP			
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Required Signatures:

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

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. 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 a 817.155, F.S.

Typed or printed name of signee

Having been named as registered agent and to accept service of process for the above state i 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)

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