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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 : (305)552-5973 Phone : (305)675-5944

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FLORIDA LIMITED LIABILITY CO. REYES E-COMMERCE LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: (Must and with the words "Limited Liability Company, "LLC." or "LEC.")

REYES E-COMMERCE LLC

ARTICLE II - Address:

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

17292 NW 60TH CT

HIALEAH, FL 33015

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or an other business entity with an active Florida registration.)

JUAN DAVID REYES

17292 NW 60TH CT

HIALEAH, FL 33015

ARTICLE IV-

The name and title of each person authorized to manage and control the Limited Liability Company:

JUAN DAVID REYES - MGR

17292 NW 60TH CT

HIALEAH, FL 33015

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 Dapartment of State constitutes a third degree felony as provided for in s.817.155, F.S.

JUAN DAVID REYES

Typed or printed name of signec

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 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 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 I am familiar with and accept the obligations of F.S.

Registered Agent's Signature (REQUIRED)

2021 APR 12 AM 6: 58