

# L21000266173

Florida Department of State  
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To: Division of Corporations  
Fax Number : (350) 617-6381

From: Account Name : CLARA GIRALDO ENROLLED AGENT  
Account Number : 119990000317  
Phone : (305) 185-9300  
Fax Number : (305) 435-1098

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

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TALLAHASSEE, FL

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FLORIDA LIMITED LIABILITY CO.  
STRUCK USA, LLC.

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
OF**

**STRUCK USA, LLC**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

**STRUCK USA, LLC**

**ARTICLE II - ADDRESS**

The principal office of the Limited Liability Company is:

**2400 NW 93<sup>RD</sup> AVE SUITE 205  
DORAL, FL. 33172**

The mailing address shall be:

**2400 NW 93<sup>RD</sup> AVE SUITE 205  
DORAL, FL. 33172**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:**

The name and the Florida street address of the registered agent are:

**ELAINE CHRISTINA DE FREITAS**

**2400 NW 93<sup>RD</sup> AVE SUITE 205  
Florida Street address (P.O.BOX NOT acceptable)  
DORAL, FL. 33172  
City, State, and Zip**

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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

#### ARTICLE IV- MANAGEMENT


The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ELAINE CHRISTINA DE FREITAS  
2400 NW 93<sup>RD</sup> AVE  
DORAL, FL. 33172

MANAGER

ERWIN ALEXANDER FRIEDMANN  
2400 NW 93<sup>RD</sup> AVE  
DORAL, FL. 33172

MANAGER

  
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.)

ELAINE CHRISTINA DE FREITAS  
Type or printed name of signer