Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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<u>::</u>	, , ,	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	#	ယ်	
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7		Empil Address:				

FLORIDA LIMITED LIABILITY CO. MACEIRAENVIO.COM LLC

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTION -	OMIANI	
ARTICLE I - Name: The name of the Limit		
The name of the Limited Liabili	ty Company is:	ļ
Λα.		
MACETER	ENVIO. COM LLC	
***\		
Company is:	address of the principal office of the Limited Liability	
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MITAME FL 3	3144	
		- 7
ADTICIEN		चेत्रकातः सम्बद्धाः
ARTICLE III - Registered Agent, I The name and the Florida street a	Registered Office:	- 1
Company cannot serve as its own Registered Age	address of the registered agent are:	
wurt an active Florida registration.)	int. You must designate an individual or another business entity	
_Dairon Enviou		
1.65	e Maceira Martinez	
	agier St Apt 201	-
		-
Miami Fl	33144	
ARTICLE IV		-
Ine name and title of each person	authorized to manage and control the Limited	
DATEON ENERQUE	E MACEIRA MARTINEZ (AMBR)	
	MELLEY MARIENEZ (AMBR)	
	·	

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 s.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 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.

s Signature (REQUIRED)