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To:

Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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

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FLORIDA LIMITED LIABILITY CO. SHENYANG AUTOMOTIVE GROUP LIMITED LLC

Certificate of Status	1
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A Dept.	A OTHER SOUTH X
ARTICLE I - Name:	
The name of the Limited Linking	
The name of the Limited Liability Company is:	
SHENYANG A- JOMOTIVE GROUP ARTICLE II - Address:	
- TOMOTIVE CO	
APTICIETY	cinited ///
AKTICLE II - Address:	
The mailing address and street address a	· -
Company is:	of the time at the
The mailing address and street address of the principal office Company is:	of the Limited Liability
1000 NW 100+1 R)	
11800 NW 100th RD STE 5	
Medley, FL 33178	
- Carey / 2 33/78	
ARTICIFUL	
ARTICLE III - Registered Agent, Registered Office:	
The name and the Florida street address of the registered age Company cannot serve as its own Registered Agent. You must designate an individual or a with an active Florida profession.	
Company cannot serve as its own Registered Agent. You was desired age	nt are: (The Limited Liability
Company cannot serve as its own Registered Agent. You must designate an individual or a with an active Florida registration.)	nother business entity
	·
RVANTONE PLA	
BYANTON, RIVERD	
11800 NW 100th ex 500	
11300 NW 100th RD STE 5	
10 ad/a 10/2	
medley, FL 33178	
ARTICLE IV	
The name and title of each person authorized to manage and c Liability Company: (MGR or AMBR)	
Liability Company Officer	Outrol the Limited
Liability Company: (MGR or AMBR)	
^	
-RYANTONI RIVERS (MARC)	
- RYANTONI RIVERO (AMBR)	
Luis Alberto URIBE CALDERON (A	
LUIS ALBRETO URIBE CA/TIONILA	MRP
THE REOF IT	

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.3.

Ryantoni Rivero
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..

Registered Agent's Signature (REQUIRED)