Florida Department of State

Division of Corporations

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## FLORIDA LIMITED LIABILITY CO. ECOCARE COMMERCIAL SOLITIONS LLC

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Nome:

The name of the Line is a second of the line is a seco
The name of the Limited Liability Company is:
ECOCGRE COMMERCIAL SOLUTIONS LLC ARTICLE 11-Address:
The mailing address and street address of the principal office of the Limited Liability  Company is:
12988 SW 132nd Avenue
Miani, EL 33186
ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (The Limited Liability with an active Florida registration.)
Ana Gloria Valdes
15453 SW 147th Street
MIRMI FL 33196
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
Ana Gioria Valdes (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.

Ana Gloria Valdes
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)