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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CLARA GIRALDO ENROLLED AGENT
Account Number : 119990000017
Phone : (305)485-9300
Fax Number : (305)485-1099

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**FLORIDA LIMITED LIABILITY CO.
CH DISTRIBUTOR USA, LLC.**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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Electronic Filing Menu

Corporate Filing Menu

Help

2022 JAN 25 PM 6:28

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF**

CH DISTRIBUTOR USA, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

CH DISTRIBUTOR USA, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**1351 NE MIAMI GARDENS DR APT 404
NORTH MIAMI, FL. 33179**

The mailing address shall be:

**1351 NE MIAMI GARDENS DR APT 404
NORTH MIAMI, FL. 33179**

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

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

LUIS ALBERTO CORREA

1351 NE MIAMI GARDENS DR APT 404
Florida Street address (P.O.BOX NOT acceptable)
NORTH MIAMI, FL. 33179
City, State, and Zip

2022 Jan 25 PM 6:29

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.

LUIS ALBERTO CORREA
1351 NE MIAMI GARDENS DR APT 404
NORTH MIAMI, FL. 33179

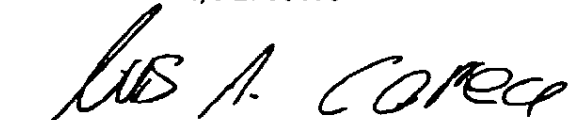
AMBR

JAIME ANDRES QUINTANA
1351 NE MIAMI GARDENS DR APT 404
NORTH MIAMI, FL. 33179

MANAGER

VICTORIA EUGENIA CHAPARRO
1351 NE MIAMI GARDENS DR APT 404
NORTH MIAMI, FL. 33179

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.)

LUIS ALBERTO CORREA

Typed or printed name of signee

2022 JAN 25 PM 6:29