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	Account Name	: EXPRESS CORPORATE FILING SERVICE INC.	HASSE HASSE
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##Cn+	on the email add	ress for this business entity to be used for fut	
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FLORIDA LIMITED LIABILITY CO. ALO TECH LATAM LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

Page: 3 of 4

		RIDA LIMITED LIABILITY COMPANY	•	• • • •
AR'	TICLE 1 - Name: name of the Limited Liability Company is:			
٠.	ALO TECH LATAM LLC (Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")		٠.
AR'	ricle II. Address: mailing address and street address of the principal office Principal Office Address:	of the Limited Liability Company is: Mailing Address:		
				_
	13950 SW 16 TER MIAMI, FL 33175	13950 SW 16 TER MIAMI, FL 33175	 -	
(The	FIGLE 111 - Registered Agent, Registered Office, & Red Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) name and the Florida street address of the registered age	sistered Agent. You must designate an individual or	2022 FEB 23	
	JENNY PAOLA ANTEP		: <u>10</u>	44.3
	•	ame —	PH 10:1	
	13950 SW 16 TER	<u> </u>	09	
	Florida street address (P.	O. Box NOT acceptable)		

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..

State

City

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

Page: 4 of 4

	Title: "AMBR" = Authorized Member "MGR" = Manager			
	AMBR	ALEXANDER I. ANTEPARA ALVAI 13950 SW 16 TER MIAMI. FL 33175	RADO	
er en			1.	
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ARTICI (If an ef the date Note: I	(Use attachment if necessary) LEV: Effective date, if other than the date of the fective date is listed, the date must be specified of filing.) If the date inserted in this block does not meet iment's effective date on the Department of State VI: Other provisions, if any.	filing: ic and cannot be more than five busines t the applicable statutory filing requireme	ss days prior to or 90 d	
	REQUIRED SIGNATURE:	OCAL. per or an authorized representative of a		

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

ALEXANDER I. ANTEPARA ALVARADO

Typed or printed name of signec

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

2022 FEB 23 PH 10: 09