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Florida Department of State
Division of Corporations
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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

**FLORIDA LIMITED LIABILITY CO.
LA FABRIC-A MANUFACTURING LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
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2022 APR 11 PM 12:04
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

La fabric-a manufacturing LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

6255 SW Kendale Lakes Cir Apt- B221
Miami FL 33183

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: *(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)*

Liceth Marilyn Mendoza Colmenares
6255 S.W. Kendale Lakes Cir
APT B221 Miami FL 33183

ARTICLE IV

The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)

(AMBR) Angel Alejandro Mendoza Colmenares

(MGR) Genesis Pereira Barroeta

(AMBR) Liceth Marilyn Mendoza Colmenares

Required Signatures:

X *Lickhof*

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.

X *Lickhof*

Registered Agent's Signature (REQUIRED)

2022 APR 11 11:04
CLERK OF THE COURT
TALLAHASSEE
FLORIDA