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Division of Corporations

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From:

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Account Number : I20000000146 Phone : (305)444-4994 : (305)328-4774 Fax Number

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## FLORIDA LIMITED LIABILITY CO.

## AGUAECOCO LLC

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

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Corporate Filing Menu

Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liabili	ty Company is:		
AGUAECOCO LLO	<u> </u>	<u> </u>	
(Must con	tain the words "Limited	Liability Company, "	'L.L.C.," or "LLC.")
ARTICLE II - Address:	Julius of the unincinal o	effica of the Limited I	Linhility Company is:
The mailing address and street a	daress of the principal c	office of the Limited	Liability Collipany is.
<u>Princip</u>	al Office Address:		Mailing Address:
4540 NW 107ΤΗ Λ'	VE		
APT 106 DORAL, FL 33178	<u> </u>	SAM	
			<del></del>
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an	y cannot serve as its own	n Registered Agent. Y	it's Signature: fou must designate an individual or
The name and the Florida street	address of the registere	d agent are:	
	VORAUS S&O LLO		
		Name	
	994 E OSCEOLA P	KWY	
	Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
	KISSIMMEE	FL	34744
	City	State	Zip

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.

/s/ Clay C. Olivar
Rogisterva Agent's Signature (REQUIRED)

(CONTINUED)

ZOZ MAY 16 AM 12: 58

CABLE AND/OR VIDEO
FRANCHISING
DIVISION OF CORPORATIONS

Page: 4 of 4

"AMBR" = Authoriz	zed Member	Name and Address:	
"MGR" = Manager  AMBR/MGR	<del></del>	AFAEL BRITO 540 NW 107TH AVE APT 10 ORAL FL 33178	06
MGR	45	'ALERIA PARRA 540 NW 1071'H AVE API' 10 ORAL FL 33178	96
(Use attachment if n	ecessary)		
effective date is listed, te of filing.) If the date inserted in	the date must be specific:	he applicable statutory filing r	(OPTIONAL) e business days prior to or 90 day equirements, this date will not be
ocument's effective date	-		
ocument's effective date	ns, if any.	, ««	

Typed or printed name of signee

## 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)

RAFAEL BRITO

CABLE AND/OR VIDEO FRANCHISING FRANCHISING OF CORPORATIONS TALLAHASSEE, FLORIDA

THE ED