5/23/22, 10:41

Division of Corporations Electronic Filing Cover Sheet

Florida Department of State

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Email Address:_____

FLORIDA LIMITED LIABILITY CO. KOACH DISTRIBUCIONES LLC

HAY 23 AM 10: 48

CO PORTIONS

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

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	;			
KOACH DISTRIBUCIONES LLC	• •	•		
(Must contain the words	"Limited Liability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited	Liability Company is:		
Principal Office Add	ress:	Mailing Address:		
1724 PEREGRINE FALCONS WA				
306 ORLANDO, FL 32837	<u>SAN</u>	(E	.	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve a another business entity with an active Florida response.)	as its own Registered Agent.		~>	•
(The Limited Liability Company cannot serve a	as its own Registered Agent. registration.)		MAY 2	
(The Limited Liability Company cannot serve a another business entity with an active Florida r	as its own Registered Agent. registration.) registered agent are:		2022 MAY 23	
(The Limited Liability Company cannot serve a another business entity with an active Florida r. The name and the Florida street address of the	as its own Registered Agent. registration.) registered agent are:		MAY 23 AP	1
(The Limited Liability Company cannot serve a another business entity with an active Florida r. The name and the Florida street address of the VORAUS S	as its own Registered Agent. registration.) registered agent are: S&O LLC		MAY 23 AM	1
(The Limited Liability Company cannot serve a another business entity with an active Florida.) The name and the Florida street address of the VORAUS S 994 E OSCI	as its own Registered Agent. registration.) registered agent are: 6&O LLC Name	You must designate an individual or	MAY 23 AP	1
(The Limited Liability Company cannot serve a another business entity with an active Florida.) The name and the Florida street address of the VORAUS S 994 E OSCI	as its own Registered Agent. registration.) registered agent are: S&O LLC Name EOLA PKWY cet address (P.O. Box NOT a	You must designate an individual or	MAY 23 AM 8:	1

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
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page: 4 of 4

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Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR/MGR	NELSON JOSE ROJAS MORALES 1724 PEREGRINE FALCONS WAY APT 306 ORLANDO, FL 32837
AMBR/MGR	MARCO CAGLIANI 1724 PEREGRINE FALCONS WAY APT 306 ORLANDO, FL 32837
	<u></u>
(Use attachment if necessary)	WAS SECULA
ective date is listed, the date must be sportfilling.)	e of filing: (OPTIONAL) = > pecific and cannot be more than five business days prior to or 90 or meet the applicable statutory filing requirements, this date will not
E VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
/a/ A	Velson Jose Rojas Morales member or a authorized representative of a member.
This document is exect I am aware that any fals	uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State
This document is executed an aware that any false constitutes a third degree.	uted in accordance with section 605.0203 (1) (b), Florida Statutes.

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)