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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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FLORIDA LIMITED LIABILITY CO. ANAMAR SERVICES & CONSULTING LLC.

Certificate of Status	1
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Corporate Filing Menu

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ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
anamar services & consulting LLC. ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability
10020 NW 9 St. CIR apt. 203 Miami Fl. 33172
ARITCLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limite's Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity
ana Deonilde Vibina Chacon
10020 NW 9 St. CIR apt 203
Miami F/. 33172.
ARTICLE IV The name and title of each person authorized to manage and control the Limited No. Liability Company: (MGR or AMBR)
Ana Deonilde Vibina Chacon - AMBR
Martin Edvardo Svarez Duran - MER

Required Signatures:

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.

Ana Deonilde Urbina Chacon

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.

Registered Agent's Signature (REQUIRED)

SECRETARY OF STATE TALL AFFASSEE FOR DRING.