

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000239861 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO. SOY HOLISTICA USA, LLC

Certificate of Status	0
Certified Copy	I
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SOY HOLISTICA USA, LLC.

ARTICLE II - Address:

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

Principal Office Address:

4995 NW 72ND AVE, SUITE #205 MIAMI, FL 33166

Mailing Address:

4995 NW 72ND AVE SUITE #205 MIAMI, FL 33166

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

WORLD OFFICE & BUSINESS PLACE INC. 4995 NW 72ND AVE SUITE #205 MIAMI, FL 33166 22 JUL 14 PH 12: 35
SECKETSKY OF STATE
ALLAHASSEE, FLORIDA

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

ARTICLE IV - Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address

AMBR

MARIA C BOTERO 4995 NW 72ND AVE SUITE #205

MIAMIL FL. 33166

MARIA J BOTERO

4995 NW 72ND AVE SUITE #205

REQUIRED SIGNATURE:

Signature of member or an authorized repre

ordance with section 605 Florida Statutes, the execution of this document doestitutes an affirmation under the penaltic of perjury that the facila stated borrin are true)

'Maria Camba

Botero Abril