

9/9/2022 9:30
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Division of Corporations

Florida Department of State

Division of Corporations
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To:

Division of Corporations
 Fax Number : (850)617-6381

From:

Account Name : ELO ENTERPRISES, INC
 Account Number : I20150000109
 Phone : (561)544-8862
 Fax Number : (954)697-0130

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

Email Address: SALES@ELOENTERPRISES.US

FLORIDA LIMITED LIABILITY CO.

FLI INVESTMENTS USA, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	01
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 TALLAHASSEE, FLORIDA

22 SEP -9 PM 12:35

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10N



September 9, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ELO ENTERPRISES, INC

SUBJECT: FLI INVESTMENTS USA, LLC
REF: W22000114096

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO
Regulatory Specialist II
New Filing Section

FAX Aud. #: H22000309701
Letter Number: 922A00020049

FILED
22 SEP -9 PM 12:35
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLI INVESTMENTS USA, LLC.

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:Mailing Address:

19364 SW 79th AVE
MIAMI, FL 33157

19364 SW 79th AVE
MIAMI, FL 33157

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

(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.)

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

LUIZ FERNANDO RACT CAMPS

Name

19364 SW 79th AVE

Florida street address (P.O. Box **NOT** acceptable)

MIAMI

FL

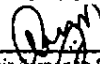
33157

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.


Luiz Fernando Ract Camps (Sep 7, 2022 15:20 EDT)

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

FABIANO LIMA

19364 SW 79th AVE

MIAMI, FL 33157

MGR

LUIZ FERNANDO RACT CAMPS

19364 SW 79th AVE

MIAMI, FL 33157

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

FABIANO LIMA - Manager

Typed or printed name of signee

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