L77000 Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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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. GLOBAL DISTRIBUTION VAPE LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

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ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
Cobal Distribution VAPE LI	<u>C</u>	/
The mailing address and street address of the principal office of the Limited Lia Company is:	bility	
1740 SW 83RD CT MIAMIFL 33755		
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limital! Liab Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	rility	
YOHON DIAZ DELGADO		
1740 SW 8300 CT	-	
MIQMI FL 33155		22
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)		00T 11 PM
YAIRON DIAZ DELGADO: (AMBR)		PH 12: 35

Required Signatures:

3052201440

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.

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.,

stered Agent's Signature (REQUIRED)