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.

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To:

Division of Corporations

Fax Number : (852)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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. PINERO'S EXPRESS LLC က် Certificate of Status Certified Copy Page Count 03 Estimated Charge \$130.00

Electronic Filing Menu Corporate Filing Menu

Help

Lazarus Corporate Filing Service Inc.

305-552-5973

Company Name: Pinero's	Ex	press	
LLC			
Year: 2023 State	Shares	Par Value	 ,
Color: BLACK BROWN	BURGUNDY	Other	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ineros Express LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Company is:	Liability
10315 SW 154 Circle Court Ap 32	
MIAMI, FL 33196	
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Company cannot serve as its own Registered Agent. You must designate on individual or another business entity with an active Florida registration.)	: Liability
Jesús Alejandro Pinero Sapez	2
10315 SW 154 Circle Court AD 32	
Migni, FC 33196	<u> </u>
ARTICLE IV The name and title of each person authorized to manage and control the Limi Liability Company: (MGR or AMBR)	red S
Jesus Alejandro Pinero Lopez	(AMBR)
10315 Sw 154 Circle Court Apt 32	
Miami F1 33196	-
	

Required Signatures:

Signature of a member or an authorized representative of 1 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 Depai tment of State constitutes a third degree felony as provided for in s.817.155, F.S.

Tosús Alejandro Pinoro Sopez

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 herely accept the appointment as registered agent and agree to act in this capacity. I further agnie 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)