L230000 Florida Department of tate

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

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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. VEGAENVIA LLC

Certificate of Status	1
Certified Copy	· · · · · · · · · · · · · · · · · · ·
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Corporate Filing Menu

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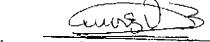
ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
VegaEnvia LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Company is:	Liability
5025 SW 133 Ct Dr.	
Miami, FL 33175	-
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 registranon.)	s' Liability
Begtiz Eka Suarez	
5025 SW 133RD Court Dr	
Miami, FL 33175-5267	
ARTICLE IV The name and title of each person authorized to manage and control the Limitiability Company: (MGR or AMBR)	: - ' -
Begtriz 5/59 Suarez (AMBR)	<u> </u>
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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.

Beatriz Elsa Suavez
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)