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COVER LETTER

TO:	New Filing Sec Division of Co				
SUBJEC		KPRESS LLC			
SUBJEC	. i ·	Nam	e of Limited Lia	bility Company	
The encl	osed Articles of	Organization and f	ee(s) are submit	ted for filing.	
Please re	turn all correspo	ondence concerning	this matter to th	ne following:	
	ERIKA CAI	RABALLO			
			Name	of Person	
	UNIVERSA	L 7 SERVICES LI	LC		
			Firm/	Company	
	2130 W 68T	TH ST			
			Α	Idress	
	HIALEAH,	FL 33016			
	UNIVERSAL	.7SVCS@GMAIL.	•	and Zip Code	
				e annual report notificat	ion)
or further	r information co	ncerning this matte	r. please call:		
	ERIKA CAR	ABALLO	786 at (343-5089	
	Nam	e of Person	Area Code	Daytime Telephor	ne Number
Enclosed	Lis a check for the	he following amour	ıt:		
□\$125.	00 Filing Fce	■\$130.00 Filing Certificate of St	atus Cer	155.00 Filing Fee & tified Copy onal copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address		Street Address	••
		iling Section on of Corporations		New Filing Section D The Centre of Tallah	
		ox 6327 assee, FL 32314		2415 N. Monroe Stre Tallahassee, FL 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

IMALE EXPRESS LLC (Must contain the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")
TICLE II - Address:	
mailing address and street address of the principal offic	e of the Limited Liability Company is:
	e of the Limited Liability Company is: Mailing Address
mailing address and street address of the principal offic	

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

another business entity with an active Florida registration.)

ARTICLE 1 - Name:

MAYKEL DIAZ ES	SQUIRO	
	Name	
11640 SW 96TH TE	ER	_
Florida street addres	ss (P.O. Box <u>NOT</u> ac	rceptable)
MIAMI	FL	33176
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.,

Haylel Dio Coporto Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

		Name and Address:	
"AMBR" = Authorized	1 Member		
"MGR" = Manager			
AMBR_		MAYKEL DIAZ ESQUIRO	
		11640 SW 96 TER	
		MIAMI, FL 33176	
AMBR		NARCISO FRANCISCO DIAZ PEREZ	
	_	11640 SW 96TH TER	_
		MIAMI, FL 33176	
			
			
(Use attachment if nec			
ment's effective date of EVI: Other provisions.	•	i state s records.	
			<u>-</u> .
REQUIRED SIGNAT	TURE:		
REQUIRED SIGNAT		traz Gesi es	
	Maykel?	Daz Equiro	
	Mayko (Signature of a men	ber or an authorized representative of a member.	
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