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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 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	<u>:</u>

FLORIDA LIMITED LIABILITY CO. GCORPORACION LANCEROS DEL PLASTICO "COLANPLAST" LLC.

Certificate of Status	1
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20.

Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A DOTTON TO	
ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
Corporación Lanceros del Plastico ARTICLE II - Address:	
ARTICLET	· CoLanplost "
ARTICLE II - Address: The mailing address and street address of the principal office of Company is:	of the Limited Liability
14/17	
1442 URbino Ave. Corofgobles.	Horida 33196
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent Company cannot serve as its own Registered Agent. You must designate an individual or and with an active Florida registration.)	are: (The Limites Liability other business entity
EMRas RIVAS	
1442 Vibinos Ade	
_ co.al gables FL 33146	
ARTICLE IV The name and title of each person authorized to manage and colliability Company: (MGR or AMBR)	ntrol the Limited
Abroham Alberto Galaviz 159que	AMBR
Enecs RIVAS	
(104)	AMSR
 -	

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.

Abraham Dalavia

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)