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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPOLICENSE, INC Account Number : 120050000118 Phone : (305)774-9606 Fax Number : (305)774-9660

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO. FERROL IMPACT WINDOWS, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF FERRIOL IMPACT WINDOWS, LLC

ARTICLE I - NAME:

The name of the Limited Liability Company Is:

FERRIOL IMPACT WINDOWS, LLC

ARTICLE II - ADDRESS:

The mailing and principal address of the Limited Liability Company is:

PRINCIPAL ADDRESS:

645 Curtiss Drive Opa Locka, FL 33054

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The Registered Agent designated is: ALEXIS FERRIOL

645 Curtiss Drive Opa Locka, FL 33054

A P

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.

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ARTICLE IV - Management/Member(s):

The name and address of each Manager or Managing Member is as follows:

TITLE:

NAME AND ADDRESS

MGR

ALEXIS FERRIOL 645 Curtiss Drive Opa Locka, FL 33054

Alexis Ferriol Manager

05/01/2023

(In accordance with section 605.0201, Florida Statutes, Free execution of this document constitutes an affirmation under The penalties of perjury that the facts stated herein are true)

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