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Division of Corporations

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Florida Department of State  
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**FLORIDA LIMITED LIABILITY CO.  
SHOPAMADO, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

SHOPAMADO, LLC

**ARTICLE II - Address**

The street address of the principal office of the Limited Liability Company is:

239 Stevenage Dr.  
Longwood, FL 32779

The mailing address of the Limited Liability Company is:

239 Stevenage Dr.  
Longwood, FL 32779

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**ARTICLE III - Registered Agent and Office and Registered Agent's Signature**

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

Keila de Lira Smith  
239 Stevenage Dr.  
Longwood, FL 32779

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, Florida Statutes

By:   
(Registered Agent's Signature)  
Keila de Lira Smith

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#### ARTICLE IV – Authorized Person(s)

The name and address of a person authorized to manage this Limited Liability Company is:

Title: P  
ImpoExpoAmado Corp  
239 Stevenage Dr.  
Longwood, FL 32779

Title: VP, MGR  
Keila de Lira Smith  
239 Stevenage Dr.  
Longwood, FL 32779

Title: AR  
Jay Smith  
239 Stevenage Dr.  
Longwood, FL 32779

Title: AR  
Maria De Fatima Bandeira Amado de Lira  
239 Stevenage Dr.  
Longwood, FL 32779

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#### ARTICLE V – Effective Date

The effective date for this Limited Liability Company shall be:

May 12, 2023.



\_\_\_\_\_  
Jair Amado De Lira Filho, Director  
(Signature of a member or an authorized representative of a member)

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.