Electronic Articles of Organization For Florida Limited Liability Company

L23000272713 FILED 8:00 AM June 05, 2023 Sec. Of State jgpollock

Article I

The name of the Limited Liability Company is: SYLPYL INDUSTRIES LLC

Article II

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

3208 INDUSTRIAL 31ST ST STE 202 FORT PIERCE, FL. US 34946

The mailing address of the Limited Liability Company is:

3208 INDUSTRIAL 31ST ST STE 202 FORT PIERCE, FL. US 34946

Article III

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

ANGEL BIOSCA 3208 INDUSTRIAL 31ST ST FORT PIERCE, FL. 34946

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.

Registered Agent Signature: ANGEL BIOSCA

Article IV

The name and address of person(s) authorized to manage LLC:

Title: AMBR CARLOS L BOYER 3208 INDUSTRIAL 31ST ST STE 202 FORT PIERCE, FL. 34946 US

Title: AMBR
MAURICIO L BOYER
3208 INDUSTRIAL 31ST ST STE 202
FORT PIERCE, FL. 34946 US

Title: AMBR CARLOS L URIAS 3208 INDUSTRIAL 31ST ST STE 202 FORT PIERCE, FL. 34946 US

Signature of member or an authorized representative

Electronic Signature: CHEYENNE MOSELEY, LEGALZOOM.COM, INC.

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.

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