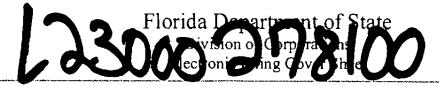
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Division of Corporations



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Fax Number : (850)617-6381

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Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

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

Email Address: \_\_\_\_CARLOSJTERAN@YAHOO.COM

FLORIDA LIMITED LIABILITY CO.

Tribante LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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H23000207935

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name: The name of the Limited Liability Company is: Tribante LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 6851 SW 44th Street, Apt 210 6851 SW 44th Street, Apt 210 Miami, FL 33155 Miami, FL 33155 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Carlos J Teran	
	Name
6851 SW 44th Str	eet, Apt 210
Florida street address (	P.O. Box <u>NOT</u> acceptable)
Miami	FL 33155
City	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..

> Carlos J Terau Registered Agent's Signature (REQUIRED)

Carlos J Teran

(CONTINUED)

Page 1 of 2

## H23000207935

Title:	Name and Address:
'AMBR" = Authorized Member	
"MGR" = Manager MGR	Carlos J Teran
	6851 SW 44th Street, Apt 210
	Miami, FL 33155
MGR	Maria D Rodriguez
mut.	6851 SW 44th Street, Apt 210
	Miami, FL 33155
<del></del>	
***************************************	
(Use attachment if necessary)	
• •	e date of filing: (OPTIONAL)
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