orida 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 : 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:_

FLORIDA LIMITED LIABILITY CO. BLUE PACKAGING LLC

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

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Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COM

ARTICLE I. Names	
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Blue o. 1	
Blue Pachaging 110	
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limited Liability	
mpany is:	
MIRAMAR FL 33029	
11/10 TC 33029	
ARTICLE W. D.	
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Stability with an active Florida registration.)	
Company cannot serve as its own Registered Agent. You must designate an individual or another business entity And Company Company Control of the Provide Registered Agent. You must designate an individual or another business entity.	
A registration	
ANDIZES ESANUZA	
4201 5 130	
47075W 183 Ax	
MIRANDAR FZ 33029	
ARTICLE IV	ØD)
The name and title of each	'W
The name and title of each person authorized to manage and control the Limited	•
$\gamma_{i} \geq 1$	-
	•
ANDRES ROMAN ECONO	1 1
AN ASMAN ASTANCES MANDA	الشب
- Alejando Co	
Alberto Alejandro Sanchez Situa (AMBR)	:

8

E/N: 93-3200 241

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.

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