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Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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FLORIDA LIMITED LIABILITY CO. J S LANDSCAPE NURSERY AND GARDEN LLC

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91/20/20:3 23:51 3052201440 LAZARUS CORPORATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APTROUP	
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
ARTICLE II - Address: The mailing address:	
LANUS (APE NURCON)	
ARTICLE II - Address:	
Company address and street address of the	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability	
M-101385W1184 + 11	
P-101385W118th Ct M, AM, F1 33186	
- 12790 SW 157 th Aug 4 101	
P-12790 SW 157 th Ave MIAMI F/33186	
ARTICLE III - Registered Agent, Registered Office:	
The name and the Florida street address of the registered agent are: (The Limite: Liability with an active Florida registration.)	
- COLUMN CALLO	
Jesus Orley Santos	
orley Janjos	
10138 SW 118 th Ct MIAMI F/ 33186.	
[AMI F] 33186	
ARTICLE IV	
The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)	T
Liability Company: (MGR or AMBR)	FELTER RECED
Tesus Oil CI	
Jesus Orley Santos	- Tarana
(AMBR) 語言	
Om F	

EIN: 99 - 0833057

Required Signatures:

Signature of a member of 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.3.

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)