, . To:

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240000619973)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (852)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

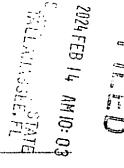
Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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. ANAMA INVESTMENT LLC

Certificate of Status	0
Certified Copy	1
Page Count	0.3
Estimated Charge	\$155.00



Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

, [⊤]o:

The name of the Limited Liability Company is:

ANAMA INVESTMENT LLC

(Must contain 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:

1820 N CORPORATE LAKES BLVD	1820 N CORPORATE LAKES BLVD
SUITE 104	SUITE 104
WESTON, FL 33326	WESTON, FL 33326

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:

MONICA LLANC)	
	Name	
1820 N CORPOR	ATE LAKES BLVD SUI	TE 104
Florida street addr	ess (P.O. Bex <u>NOT</u> acce	ptable)
WESTON	FLORIDA	33326

WESTON FLORIDA 33326
City State 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..

MONACA LLANO

Registered Agent's Signature (REQUIRED)

(CONTINUED)



To .

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	MONICA LLANO 1870 N CORPORATE LAKES BLVD SUITE 104 WESTON, FL 33326
<u>MGR</u>	JOSE LUIS BANGS 1820 N CORPORATE LAKES BLVD SUITE 104 WESTON, FL 33326
(Use attachment if necessary)	
(If an effective date is listed, the date must be sp the date of filing.)	e of filing:
ARTICLE VI: Other provisions, it any,	
<u>REOUIRED</u> SIGNATURE:	ONACA LLANO
Tod	
Signature of a m This document is exect I am aware that any fals	number or an authorized representative of a member, ated in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State see felony as provided for in s.\$17.155, F.S.
Signature of a m This document is exect I am aware that any fals constitutes a third degree	number or an authorized representative of a member, and in accordance with section 605,0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

17 11 ED