

01/06/2014

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LAZARUS CORPORATE

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
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**FLORIDA LIMITED LIABILITY CO.
CELAJE SERVICES LIMITED LIABILITY COMPANY**

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

RECEIVED

2025 JAN -7 PM 4:40

STATE OF FLORIDA
TALLAHASSEE, FL

FILED
2025 JAN -7 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION **FOR** **FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")*

CELAJE SERVICES Limited Liability Company

ARTICLE II - Address:

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

9321 SW 138 PL. Zip Code 33186
Miami, Florida

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: *(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.)*

ASOIN LLC
2320 Ponce de Leon Blvd, Coral Gables
Miami, Florida

ARTICLE IV -

The name and title of each person authorized to manage and control the Limited Liability Company:

Daniel Gonzalez Hernandez – AMBR (50%) and Business development Manager.
Jessica Tantalean Noriega – AMBR (50%) Administration and Business Manager.

We are two partners, each at 50% of the total.
SOLIDARITY ADMINISTRATION

ARTICLE V -

Corporate purpose:

The main corporate purpose is the importation, distribution and marketing of beverages and food, as well as the management of real estate. As complementary activities, the corporate purpose will be as broad as possible.

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TALLAHASSEE, FLORIDA

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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.

DANIEL GONZALEZ HERNANDEZ

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)