From: Yanet Avila

Division of Corporations **Electronic Filing Cover Sheet**

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FLORIDA LIMITED LIABILITY CO. OLEO NP SERVICE LLC

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Electronic Filing Menu

Corporate Filing Menu

Help



From: Yanet Avila

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITUDI LARRIETTY CYMDANIA

7111112122011	DATIONTOR	LEACHER LEACHER	ATTACKET I COMPANY				
ARTICLE I - Name: The name of the Limited Liability	Company is:						
· · · · · · · · · · · · · · · · · · ·	,						
OLEO NP SERVICE	LLC						
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")							
ARTICLE II - Address:							
The mailing address and street add	dress of the principal o	Mice of the Limite	ed Liability Company is:				
<u>Principal</u>	Office Address:		Mailing Address:				
1420 BRICKELL BAY	r DR.	14	1420 BRICKELL BAY DR.				
APT 1402			APT 1402				
MIAMI, FL. 33131			MIAMI, FL 33131				
ARTICLE III - Registered Agen (The Limited Liability Company canother business entity with an ac The name and the Florida street ad	annot serve as its own tive Florida registratio	Registered Agent n.)	ent's Signature: . You must designate an individual or				
, , , , , , , , , , , , , , , , , , ,							
YOALIS RIVERO							
Name							
1420 BRICKELL BAY DR. APT 1402							
Florida street address (P.O. Box NOT acceptable)							
	MIAMI	FL	33131				

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..

State

City

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager YOALIS RIVERO 1420 BRICKELL BAY DR. APT 1402 MIAMI, FL. 33131 AMBR (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: ___ (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- 5 5.00 Certificate of Status (Optional)

YOALIS RIVERO