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# Florida Department of State
## Division of Corporations
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Division of Corporations
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From:
Account Name : COBPOLICENSE, INC
Account Number : 130050000218
Phone : (305)774-9606
Fax Number : (305)774-9660

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: victorcustomwork@hotmail.com

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## FLORIDA LIMITED LIABILITY CO.
## VICMAR CUSTOM WORK, LLC

| | |
|---|---|
| Certificate of Status | 0 |
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF VICMAR CUSTOM WORK, LLC

**ARTICLE I - NAME:**

The name of the Limited Liability Company is:

**VICMAR CUSTOM WORK, LLC**

**ARTICLE II - ADDRESS:**

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

**PRINCIPAL ADDRESS:** 25500 NW 124th Court
Homestead, FL 33032

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**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The Registered Agent designated is: **VICTOR HERNANDEZ**

**25500 SW 124th Court**
**Homestead, FL 33032**

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.

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ARTICLE IV - Management/Member(s):

The name and address of each Manager or Managing Member is as follows:

| TITLE: | NAME AND ADDRESS |
|---|---|
| MGR | VICTOR HERNANDEZ<br>25500 SW 124th Court<br>Homestead, FL 33032 |

VICTOR HERNANDEZ
Manager

(In accordance with section 605.0201, Florida Statutes,
The execution of this document constitutes an affirmation under
The penalties of perjury that the facts stated herein are true)