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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

patio brisas, llc

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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03 SEP 18 PM 4:24
DIVISION OF CORPORATION

APPROVED
AND
FILED
03 SEP 18 AM 8:57
SEC. OF STATE
TALLAHASSEE, FLORIDA

JB
9-19-08

HUAWU 20045

The name of the Limited Liability Company is:

PATIO BRISAS, LLC

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

321 Jefferson Street, 2nd Floor
Hollywood, FL 33019

The name and the Florida street address of the registered agent are:

City, State, and 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 603, F.S.



Registered Agent's Signature

_____ The Limited Liability Company is to be managed by the members and is, therefore, a member managed company.

Manuel Grosskopf

Signature of a member or an authorized representative of a member.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

03 SEP 18 AM 8:57
ALLAHASSFC, FLORIDY

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