L040000043729

(Requestor's Name) (Address)	SECRETARY OF TILLAHAS
(Address)	7
(City/State/Zip/Phone #)	
(Business Entity Name) (Document Number)	
Certified Copies Certificates of Status Special Instructions to Filing Officer:	

Office Use Only

RY OF STATE REFELORIDA ESCEPTEDA

700036227467

05/13/04--01034--001 **78.75

06/07/04--010)4 HIB **56,25

1

TRANSMITTAL LETTER

FILED

P 12: 33

TO:	Registration Section			
	Division of Corporations	2004 JUN -7 SECRETARY TALLAHASSE		
SUBJI	MAZAL 18 DEVELOPMENT, LLC.	SECRETARY		
50.50	(Name of Limited Liability Company)			
The en	closed Articles of Organization and fee(s) are submitted for filing.			
	Please return all correspondence concerning this matter to the following:			
	(Name of Person)			
	RAMON REYES P.A.			
	(Firm/Company)			
	5035 PALM AVE			
	(Address)			
	HIALEAH, FL 33012			
	(City/State and Zip Code)			
For fu	rther information concerning this matter, please call:			
	RAMON REYES at (305) 822-0669			
	(Name of Person) (Area Code & Daytime Telephone Num	ber)		

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

FILED

ARTICLES OF ORGANIZATION FOR

FLORIDA LIMITED LIABILITY COMPANY JUN -7 P 12: 33

ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY OF STATI TALLAHASSEE, FLORIE
MAZAL 18 DEVELOPMENT, LLC.	
ARTICLE II - Address: The mailing address and street address of the principle.	ipal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
16375 N.E. 18th AVE	16375 N.E. 18th AVE
STE. 331	STE.331
NORTH MIAMI BEACH, FL 33162	NORTH MIAMI BEACH, FL 33162
The name and the Florida street address of the regi	
Name	
16375 N.E. 18th AVE.	
Florida street address (P.O. B	
Florida street address (P.O. B NORTH MIAMI BEACH, City, State, and	ox <u>NOT</u> acceptable) FLORIDA 33162

Page 1 of 2 (CONTINUED)

registered agent as provided for in Chapter 608, Florida Statutes..

FILED

ARTICLE IV- Manager(s) or Manager The name and address of each Manager	ng Member(s): or Managing Member is as follows:	_				
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA				
MGRM	ALBERTO BENALLOUN	_				
	16375 N.E. 18th AVE STE					
	NORTH MIAMI BEACH, FL 3	3162				
MGRM	YANNICK BENZAZON					
	16375 N.E. 18th AVE STE					
	NORTH MIAMI BEACH, FL 3	3162				
						
						
(Use attachment if necessary)						
NOTE: An additional article must be added if an effective date is requested.						
REQUIRED SIGNATURE:	of superf					
Signature of a member or an authorized depresentative 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.)						
YANNICK BENZAZON						
Typed or printed name of signee						

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)