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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
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LAZARUS CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):
1. ALCAZAR PROPE	ENT NUMBER(S), (if known): RTIES, LLC (Document #) (Document #)
(Corporation Name)	(Document #)
2.	SEE PO
(Corporation Name)	(Document #)
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(Corporation Name)	(Document #)
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NEW FILINGS	AMENDMENTS
Profit	Amendment
Not for Profit Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other ·	☐ Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report	Foreign
☐ Fictitious Name	Limited Partnership
• •	Reinstatement Trademark
	Other
•	
	Examiner's Initials

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
ALCazar Properties, LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
-
5305 SW 8 STREET
Miami, FL 33134
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature;
Circle 1
The name and the Florida street address of the registered agent are:
_ Anna M. Hicho
HARA M. MICHO
The name and the Florida street address of the registered agent are: Anna M. Hicho Name 5305 Sul & Street Florida street address (P.O. Box NOT acceptable)
Florida de set de diseas (D.O. Para NOT accounte bla)
Florida street address (P.O. Box NOT acceptable)
Miami F FL 3313 9 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 608, F.S
Unas M. Hicko
Registered Agent's Signature
Article IV - Management (Check box if applicable.)
The Limited Liability Company is to be managed by one manager or more managers and is,
therefore, a manager - managed company
Amida & Hicko- Minager momber
A Manager Manager
Amido S. Hicko-Manager member Anna M. Hicko-Manager member
(An additional article must be added if an effective date is requested)
Cano M. Head
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.)
Ann M Hick
Typed or printed name of signee
y 3 beet of billited 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)