

12/10/2010 11:11:30 AM 305 220 1446 LAZARUS
Division of Corporations

L1000027236

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H10000265687 3)))

EFFECTIVE DATE
01/21/2011



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : LAZARUS CORPORATE FILING SERVICE,
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
NEWSTART PROPERTIES LLC**

Certificate of Status 1
Certified Copy 0
Page Count 03
Estimated Charge \$130.00

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K. BALLY
EXAMINER
DEC 13 2010

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE
01/01/2011

NewStart Properties LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1121 Grandon Blvd D101
Key Biscayne FL 33149

1121 Grandon Blvd D-101
Key Biscayne FL 33149

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)


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

Rogelio Trujillo
Name

1121 Grandon Blvd D-101
Florida street address (P.O. Box NOT acceptable)
Key Biscayne FL 33149
City, State, and Zip

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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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Rogelio Trujillo
1121 CRANDON BLVD D-101
KEY BISCAYNE FL 33149

MGRM

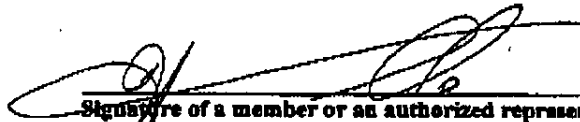
Liza Flushing Trujillo
1121 CRANDON BLVD D-101
KEY BISCAYNE FL 33149

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1-1-11 (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.)

REQUIRED SIGNATURE:



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. 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.)

Rogelio Trujillo

Typed or printed name of signer

Filing Fees:

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

5 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

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