

L 1200011772

(Requestor's Name)

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(Address)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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400238571924

EFFECTIVE DATE
10-16-2012

FILED
12 SEP 13 AM 11:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08/20/12--01041--013 **160.00

K SALLY
EXAMINER
SEP 14 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 21, 2012

ANDRES DAVID TIMOR
3001 SW 132ND CT.
MIAMI, FL 33175

SUBJECT: REIS, LLC.
Ref. Number: W12000043465

We have received your document for REIS, LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P98000038395 "REIS, INC.".

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 412A00021451

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: REIS, LLC.
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Andres David Timor
Name of Person

~~Reis, LLC.~~ ADRES, LLC
Firm/Company

3001 S.W. 132nd Ct
Address

Miami FL 33175
City/State and Zip Code

AndresTimor@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andres D. Timor at (786) 443 1450
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE
10-16-2012

ADRES, 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:

3001 S.W. 132nd CT
Miami, FL 33175

3001 S.W. 132nd CT
Miami, FL 33175

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:

D. Viviana D' Angelo
Name

3001 S.W. 132nd CT

Florida street address (P.O. Box **NOT** acceptable)

Miami FL 33175

City, State, and Zip

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TALLAHASSEE, FLORIDA

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)

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

Andres D. Timor
Managing member
MGRM

Dora V. D'Angelo
Managing member
MGRM

Name and Address:

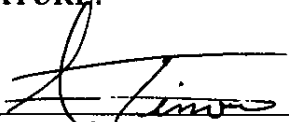
Andres D. Timor
5731 NW 112th Ave
Ste 6-106
Doral, FL 33178

Dora V. D'Angelo
5731 NW 112th Ave
Ste 6-106
Doral FL 33178

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: October 16, 2012 (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.)

Andres D. Timor
Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)