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Florida Department of State
Division of Corporations
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(((H14000044960 3)))



H140000449603ABC

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

From: Account Name : MICHAEL J. FREEMAN, P.A.
Account Number : 072720000142
Phone : (305) 442-1567
Fax Number : (305) 442-1227

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.
3601 Setal LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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10:57am FEB 25 2014

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

3601 SETAI LLC

ARTICLE II - Address:

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

Principal Office Address: 153 Sevilla Avenue Coral Gables, FL 33134

Mailing Address: P.O. Box 140668 Coral Gables, FL 33114-0668

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

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


M. J. F. Registered Agent Corp.
Name

153 Sevilla Avenue
Florida Street Address (No P.O. Box)

Coral Gables, FL 33134
City, State, and Zipcode

14 FEB 24 AM 9:19
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 605, F.S..



Registered Agent's Signature
(Michael J. Freeman, President)

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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:

AMBR = Authorized Member
MGR = Manager

Name and Address:

MGR

Michael J Freeman
153 Sevilla Avenue
Coral Gables
FL 33134

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member
(In accordance with section 605.0203 (1) (b), 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.)

Michael J Freeman, its manager
Type or print name of signee

Filing Fees:

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

STATE OF FLORIDA
16 SEP 24 10 09 18
TALLAHASSEE

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