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(Requestor's Name)	
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(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Business Littly Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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EFFECTIVE DATE 0/01/17

n 11/03/16

COVER LETTER

то:	Registration Section Division of Corporations		
SUBJEC	5471 West 1st Court, LLC		
OUDJE		Limited Liabili	ty Company
The enc	losed Articles of Organization and fee(s)	are submitted	for filing.
Please re	eturn all correspondence concerning this	matter to the fe	ollowing:
	Lourdes D. Ermer, Esq.		
		Name of	Person
	Dergan Ermer Law, PA		
		Firm/Cor	mpany
	7900 Harbor Island Drive, No. 713		
		Addre	ess
	North Bay Village, FL 33141		
	Yogirentals@gmail.com	City/State and	d Zip Code
	E-mail address: (to be us	sed for future ar	nnual report notification)
For furthe	r information concerning this matter, ple	ease call:	
	Lourdes Ermer	305	213-4124
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	d is a check for the following amount:		
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certifie	0 Filing Fee & \$\ \text{S160.00 Filing Fee,} \\ \text{Certificate of Status & } \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}
	Mailing Address New Filing Section Division of Corporations	- -	Street Address New Filing Section Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

, ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

5471 West 1st	·		
(Mus	t end with the words "Limited Li	ability Compa	ny, "L.L.C.," or "LLC.")
TCLE II - Address:	reet address of the principal office	e of the Limit	ed Liability Company is:
J	incipal Office Address:	e of the Bunk	Mailing Address:
45 West 17th Street, Hialcah, FL 33010			5 West 17th Street, Hialeah, FL 33010
45 West 17th S	treet, Hialcah, FL 33010	43	west 17th Street, Haican, 112 2501
CICLE III - Registere	ed Agent, Registered Office, &	Registered Ag	
CICLE III - Registere Limited Liability Con ner business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own Re	Registered Agen	gent's Signature:
CICLE III - Registere Limited Liability Con ner business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own Reth an active Florida registration.) street address of the registered against Lourdes D. Ermer, Esq.	Registered Agen	gent's Signature:
CICLE III - Registere Limited Liability Con ner business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own Reth an active Florida registration.) street address of the registered against Lourdes D. Ermer, Esq.	Registered Agengistered Agengistered Agengistered Agengent are:	gent's Signature:
CICLE III - Registere Limited Liability Con ner business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own Reth an active Florida registration.) street address of the registered against Lourdes D. Ermer, Esq.	Registered Agen gent are:	gent's Signature: t. You must designate an individual o
CICLE III - Registere Limited Liability Con ner business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own Reth an active Florida registration.) street address of the registered again Lourdes D. Ermer, Esq. 7900 Harbor Island Dri	Registered Agen gent are:	gent's Signature: t. You must designate an individual o

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR/AMBR	PEDRO A. SANCHEZ 45 West 17th Street Hialeah, FL 33010
(Use attachment if necessary)	
ective date is listed, the date must of filing.) If the date inserted in this block does	be specific and cannot be more than five business days prior to or 90 da not meet the applicable statutory filing requirements, this date will not be
ment's effective date on the Depart EVI: Other provisions, if any. Manager managed LLC	ment of State's records.
,	

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Pedro A. Sanchez

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)