L19000161330

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



100330117261

05/68/19--01018--000 *:180.00

FILED

19 JUN 18 &MIT: 19

SEGNARASEP ALORIDA

N CULLIGAN JUL 1 _ 2019

COVER LETTER

TO:	New Filing Section Division of Corporations		
SUBJEC	1950 NW 139TH STREET LLC		
SUBJE		Limited Liabili	ty Company
The encl	osed Articles of Organization and fee(s)	are submitted	for filing.
Please re	turn all correspondence concerning this	matter to the fe	ollowing:
	RICHARD N. KRINZMAN		
		Name of	Person
	KRINZMAN, HUSS & LUBETSK	Y, LLP	
		Firm/Co	npany
	800 BRICKELL AVENUE, SUITE	1501	
		Addro	ess
	MIAMI, FL 33131		
	RNK@KHLLAW.COM	City/State and	I Zip Code
		sed for future a	nnual report notification)
For furthe	r information concerning this matter, plo	ease call:	
	RICHARD N. KRINZMAN	305	854-9700)
	Name of Person	·———	Daytime Telephone Number
Enclose	is a check for the following amount:		
]\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	L—/Certific	O Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address
	New Filing Section Division of Corporations		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

ARTICLE I - Name:

	NW 139TH STREET LLC (Must contain the words "Limited Li	iability Company, "L	L.C.," or "LLC.")	_
ARTICLE II - A	Address: ress and street address of the principal off	ice of the Limited Lie	ability Company is:	
	Principal Office Address:		Mailing Address:	
525 NE 93 STREET		525 NE	93 STREET	
	MIAMI SHORES, FL 33138		75 5 1 KE171	
ARTICLE III - (The Limited Lin	MI SHORES, FL 33138 Registered Agent, Registered Office, & ability Company cannot serve as its own For a cutty with an active Florida registration	Registered Agent's	SHORES, FL 33138 Signature:	- - - -
ARTICLE III - (The Limited Lia another business	Registered Agent, Registered Office, & bility Company cannot serve as its own F sentity with an active Florida registration e Florida street address of the registered a	Registered Agent's Registered Agent. You .) agent are: MAN, P.A.	SHORES, FL 33138 Signature:	19 NUL 91
ARTICLE III - (The Limited Lia another business	Registered Agent, Registered Office, & bility Company cannot serve as its own F sentity with an active Florida registration e Florida street address of the registered a	Registered Agent's Registered Agent. You .)	SHORES, FL 33138 Signature: a must designate an individual or	19 JUN 18 6
ARTICLE III - (The Limited Lia another business	Registered Agent, Registered Office, & ability Company cannot serve as its own Fix entity with an active Florida registration e Florida street address of the registered a RICHARD N. KRINZ 800 BRICKELL AVE	Registered Agent's Registered Agent. You .) agent are: MAN, P.A. Name	SHORES, FL 33138 Signature: I must designate an individual or	19 JUN 18 1311
ARTICLE III - (The Limited Lia another business	Registered Agent, Registered Office, & bility Company cannot serve as its own Fis entity with an active Florida registration e Florida street address of the registered a RICHARD N. KRINZ	Registered Agent's Registered Agent. You .) agent are: MAN, P.A. Name	SHORES, FL 33138 Signature: I must designate an individual or	19 JUN 18 13111111
ARTICLE III - (The Limited Lia another business	Registered Agent, Registered Office, & ability Company cannot serve as its own Fix entity with an active Florida registration e Florida street address of the registered a RICHARD N. KRINZ 800 BRICKELL AVE	Registered Agent's Registered Agent. You .) agent are: MAN, P.A. Name	SHORES, FL 33138 Signature: I must designate an individual or	, •

Registered Agent's Signature (REQUIRED)

(CONTINUED) /

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

·	
Title:	Name and Address:
"AMBR" = Authorized Member	TRUCK RITU MUNICIPA
"MGR" = Manager	
MGR	EDWIN REEDER
MOK	525 NE 93 STREET
	MIAMI SHORES, FL 33138
	AS: 19
 	
	FILED
	· · · · · · · · · · · · · · · · · · ·
	<u> </u>
	m 7: 0
	18 ::11: 19 ::11: 19
	
	
late of filing.)	ecific and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed as
	
REQUIRED SIGNATURE:	
<u> </u>	
	1 6/4/4 / - 2
Signame	mber or an authorized representative of a member.
This document is execut	ed in accordance with section 605.0203 (1) (b), Florida Statutes.
	information submitted in a document to the Department of State
conctitutes a third degree	e felony as provided for in s.817,155, F.S.
constitutes a tinta degree	relong as provided for in 3.017.135, 1.5.
RICHARD N. KE	RINZMAN 250

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)