

L970000000729

TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
97 JUL -2 PM 2:29
STATE
TALLAHASSEE, FLORIDA

SUBJECT: SOLAT L.C.
(Proposed limited liability company name - must include suffix)

700002229427--9
-07/02/97--01091--001
***293.75 ***293.75

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit
\$ 35.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50.
Please send one check for the total amount made payable to the Florida Department of State.

FROM: JEANNETTE IGLESIAS
Name (Printed or typed)

210 SW 15 ROAD #300
Address

MIAMI FL 33129
City, State & Zip

(305) 868-4991
Daytime Telephone number

QN 7-3-97

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is: *SOLAT L.C.*

FILED
97 JUL -2 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: *210 SW 15 ROAD #300 MIAMI, FL 33129*

*street address: 16300 N.E. 19th AVE., Suite 104
N. MIAMI BEACH, FL 33162*

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be: *50 years*

ARTICLE IV - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

JEANNETTE IGLESIAS

210 SW 15 ROAD #300 MIAMI, FL 33129

ERNESTO A. SANTAMARIA

17100 COLLINS AVE. #118 Suite 1192

SUNNY ISLES, FL 33160

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____
SOLAT L.C. _____ deposes and says:

1) the above named limited liability company has at least two members

2) the total amount of cash contributed by the member(s) is \$500.⁰⁰

3) if any, the agreed value of property other than cash contributed by member(s) is \$0.-
A description of the property is attached and made a part hereto.

4) the amount of cash or property anticipated to be contributed by member(s) is \$2,500.⁰⁰
This total includes amounts from 2 and 3 above. 3,000.⁰⁰



Signature of a member or authorized representative of a member.

In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____
SOLAT L.C. deposes and says

1) the above named limited liability company has at least two members

2) the total amount of cash contributed by the member(s) is

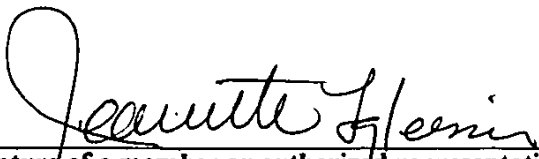
\$ 500.00

3) if any, the agreed value of property other than cash contributed by member(s) is
A description of the property is attached and made a part hereto.

\$ 0-

4) the amount of cash or property anticipated to be contributed by member(s) is
This total includes amounts from 2 and 3 above.

\$ 2,500.00
3,000.00



Signature of a member or authorized representative of a member.

In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED
97 JUL -2 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: SOLAT L.C.

2. The name and address of the registered agent and office is:

JEANNETTE IGLESIAS
(NAME)

210 SW 15 ROAD #300
(P. O. Box NOT ACCEPTABLE)

MIAMI, FL 33129
(CITY/STATE/ZIP)

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.

Jeannette Iglesias
(SIGNATURE)

6-30-97
(DATE)