## L1000067569

| (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: |  |  |  |  |
|   |  |  |  |  |
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Office Use Only



800182138528

06/23/10--01003--008 \*\*125.00



06/25/10--01012--002 \*\*55.00

CORAFLAL

B. KOHR

JUN 25 2010

**EXAMINER** 

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|                  | PICK UP:                                      | 6-24-10 | JUH 24 COROS |
| 公                | CERTIFIED COPY                                |         | <b>4 5 6</b> |
|                  | РНОТОСОРУ                                     |         | <b>.</b>     |
|                  | CUS   |         |              |
| $\triangleright$ | FILING  | LLC     |              |
|                  |   |         |              |
|                  | Rushasi 52 LLC                                |         |              |
| ((               | KUSHASI 53 LLC<br>CORPORATE NAME AND DOCUMENT | · #)    |              |
|                  |   |         |              |
| (6               | CORPORATE NAME AND DOCUMENT                   | #)      |              |
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| <del>-</del>     | CONDOD AGEN AND AND DO CHA CONTROL            |         |              |
| ((               | CORPORATE NAME AND DOCUMENT                   | #)      |              |
| CIAL I           | INSTRUCTIONS:                                 |         |              |
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|                  |   |         |              |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:   | ن<br>الحديث  |  |  |  |
|---|--|--|--|--|
| Rushasi 52 LLC  (Must end with the words "Limited Liabili   | by Company, "L.L.C.," or "LLC.")  ncipal office of the Limited Liability Company is:   |  |  |  |
|   |  |  |  |  |
| ARTICLE II - Address:   | 3  |  |  |  |
| The mailing address and street address of the pri   | ncipal office of the Limited Liability Compansis:  |  |  |  |
| Principal Office Address:   | Mailing Address:   |  |  |  |
| 3600 Yacht Club Drive, No. 1604   | 3600 Yacht Club Drive, No. 1604  |  |  |  |
| Aventura, FL 33180  | Aventura, FL 33180   |  |  |  |
| NRAI Services, Inc.   | Name   |  |  |  |
| 2731 Executive Park Drive, Suite 4  Florida street address (P.O. Box NOT acceptable)  |  |  |  |  |
| Weston  | • •  |  |  |  |
| Weston FL 33331  City, State, and Zip   |  |  |  |  |
| liability company at the place designated in the<br>registered agent and agree to act in this capacity.<br>statutes relating to the proper and complete per | ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S |  |  |  |

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Moises Cohen 3600 Yacht Club Drive, No. 1604 Aventura, FL 33180 Mercedes Cohen MGRM 3600 Yacht Club Drive, No. 1604 Aventura, FL 33180 MGRM Simon Cohen 3600 Yacht Club Drive, No. 1604 Aventura, FL 33180 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_ . (OPTIONAL)

**REQUIRED SIGNATURE:** 

to or 90 days after the date of filing.)

Signature of a member or an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(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.)

Moises Cohen

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)