Division of Corporation Electronic Filing Cover Sheet

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> > (((H14000054073 3)))



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Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: CORP USA

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

\*\*Enter the smail address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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## FLORIDA LIMITED LIABILITY CO.

133 NE 2 AVENUE, #717, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Corporate Filing Menu

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PAGE 01/04

850-617-6381



March 6, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: 133 NE 2 AVENUE, #717, LLC

REF: W14000014388

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

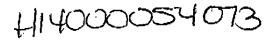
Karen A Saly Regulatory Specialist II FAX Aud. #: H14000054073 Letter Number: 814A00004887

RECEIVED

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3ECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314



TILED BY S. OF ST.

## AIXITCLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

133 NR 2 Avenne, #717, L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Malling Address:

3704 Anderson Road

Coral Gables. FL 33134

3704 Anderson Road Coral Gables, VL 33134

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or mother business entity with an active Florida registration.)

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

Carlos E. Barquin

Name

3704 Anderson Road

Florida streat address (P.O. Box NOT acceptable)

Coral Gables

PL 33134

City

Zip

Flowing been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this cartificate. 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 (REQUIRED)

(CONTINUED)

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Title:	Name and Address:
'AMBR" = Authorized Momber 'MGR" = Manager	•
MGR MGR	Carlos E. Barquin
	3/04 Anderson Hoad, Coral Gabies,
	33134
•	
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Page 2 of 2

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