

**L14 000157713**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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H140002319373ABC/

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : HUNT & GROSS, P.A.  
Account Number : I20010000038  
Phone : (561)997-9223  
Fax Number : (561)989-8998

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 OCT - 3 PM 9:40

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

RECEIVED  
14 OCT -8 PM 12:00  
DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

**FLORIDA LIMITED LIABILITY CO.  
1430 Brickell Ventures, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

OCT - 8 2014

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October 6, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

HUNT & GROSS, P.A.

SUBJECT: 1430 BRICKELL VENTURES, LLC  
REF: W14000060568

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2014 OCT - 3 AM 9 40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile 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.

Tammi Cline  
Regulatory Specialist II

FAX Aud. #: H14000231937  
Letter Number: 314A00021254

RECEIVED  
14 OCT - 8 PM 12:00  
DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 1430 BRICKELL VENTURES, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Betsy Courant  
Name of Person  
Hunt & Gross, PA  
Firm/Company  
185 NW Spanish River Blvd., Suite 220  
Address  
Boca Raton, FL 33431  
City/State and Zip Code  
dale.reed@y-group.com  
E-mail address. (to be used for future annual report notification)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Dale Reed at ( 305 ) 769-3777  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street/Courier Address  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

1430 BRICKELL VENTURES, LLC  
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC")

ARTICLE II - Address:  
The mailing address and street address of the principal office of the Limited Liability Company is:

<u>Principal Office Address:</u>	<u>Mailing Address:</u>
<u>1221 Brickell Avenue, Suite 660</u>	<u>1221 Brickell Avenue, Suite 660</u>
<u>Miami, FL 33131</u>	<u>Miami, FL 33131</u>

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 another business entity with an active Florida registration.)

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

Dale Reed  
Name

1221 Brickell Avenue, Suite 660  
Florida street address (P.O. Box NOT acceptable)

Miami                      FL 33131  
City                                      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 as provided for in Chapter 605, F.S.*

  
Registered Agent's Signature (REQUIRED)

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TALLAHASSEE, FLORIDA

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**ARTICLE IV-**

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

Title:  
"AMBR" = Authorized Member  
"MGR" = Manager  
MGR

Name and Address:

John Yanopoulos  
1221 Brickell Avenue, Suite 660  
Miami, FL 33131  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SECRETARY OF STATE  
FALLAHASSEEL, FLORIDA

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(Use attachment if necessary)

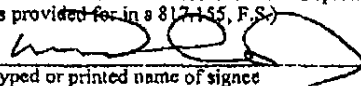
**ARTICLE V:** Effective date, if other than the date of filing: October 1, 2014 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing)

**ARTICLE VI:** Other provisions, if any

\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**

\_\_\_\_\_  
Signature of a member or an authorized representative of a member.  
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true 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 817.135, F.S.)

Dale Reed   
\_\_\_\_\_  
Typed or printed name of signer

**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)

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