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NAME:

LIBERTY ASSET GROUP LLC

TYPE OF FILING: ARTICLES

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### COVER LETTER

	Registration Section Division of Corporations	
SUD INC	Liberty Asset Group LLC	
SUBJEC		imited Liability Company
The enclo	sed Articles of Organization and fee(s) a	re submitted for filing.
Please ret	urn all correspondence concerning this n	natter to the following:
	Ellis R. Mirsky	
		Name of Person
	Mirsky and Associates, PLLC	
		Firm/Company
	303 South Broadway, Suite 222	
		Address
	Tarrytown, NY 10591	
	emirsky@trial.com	City/State and Zip Code
	E-mail address: (to be used	d for future annual report notification)
For further	information concerning this matter, pleas	se call:
	Ellis R. Mirsky	332-4700
		Area Code Daytime Telephone Number
Enclosed i	is a check for the following amount:	
\$125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee FL 32314	Street Address  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle

2661 Executive Center Circle Tallahassee, FL 32301

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

ARTICLE I - Name: The name of the Limited Liability	Company is:		
Liberty Asset Group L (Must and w		Liability Com	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	iress of the principal of	ffice of the Lim	nited Liability Company is:
<u>Principal</u>	Office Address:		Malling Address:
Magda Santiso  3820 SW 79th Avenue Miami, FL 33155  ARTICLE III - Registered Ages (The Limited Liability Company of another business entity with an ac	at, Registered Office, a	& Registered A	Magda Santiso 3820 SW 79th Avenue, Suite 92 Minml, FL 33155 Agent's Signature: ent. You must designate an individual or
The name and the Florida street ac	Idress of the registered	agent are:	
	Magda Santiso	Name	
	3820 SW 79th Avenu		YI acceptable)
	Miami	FL	33155
	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 as provided for in Chapter 605, F.S..

(CONTINUED)

Registered Agent's Signature (XEQUICED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Membe	Name and Address:
"MGR" = Manager	
MGR	Adrian Alexandru
	8925 Collins Avenue, Unit 7F
	Surfside, FL 33154-3530
•	
·	
(Use attachment if necessary)	
CLE V: Effective date, if other than effective date is listed, the date mute of filling.)	es not meet the applicable statutory filing requirements, this date will not be liste
CLE V: Effective dute, if other than effective date is listed, the date must of filling.)  If the date inserted in this block document's effective date on the Deport of t	es not meet the applicable statutory filing requirements, this date will not be liste
CLE V: Effective dute, if other than effective date is listed, the date must of filling.)  If the date inserted in this block document's effective date on the Deport of t	

Page 2 of 2

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)