

L 1500015 3438

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.

((H15000220867 3)))



H150002208673ABC+

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

FILED

15 SEP 14 AM 2:04

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : SUPERBIZ.COM, INC.
Account Number : I2007C000160
Phone : (800) 494-3124
Fax Number : (305) 675-2811

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

Email Address: _____

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

15 SEP 14 PM 11:25

FILED

**FLORIDA LIMITED LIABILITY CO.
35 WEST DESIGN LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$125.00 |

SEP 15 2015

S. GILBERT

H15000220867 3

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

35 WEST DESIGN LLC

ARTICLE II ADDRESS

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

15561 SW 48TH STREET

MIAMI, FLORIDA 33185

ARTICLE III REGISTERED AGENT

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


PAUL HANSEN

15561 SW 48TH STREET

MIAMI, FLORIDA 33185

FILED
15 SEP 14 PM 11:25
TALLAHASSEE, FLORIDA

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.

x 

PAUL HANSEN / Registered Agent's signature

H15000220867 3

H15000220867 3

PAGE 2 35 WEST DESIGN LLC

ARTICLE IV

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

AUTHORIZED MEMBER

ALEJANDRO ALONSO

15561 SW 48TH STREET

MIAMI, FLORIDA 33185

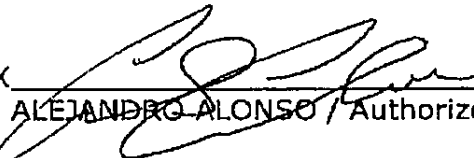
AUTHORIZED MEMBER

ANDREA SLODOWICZ

2573 TIGERTAIL AVENUE

COCONUT GROVE, FLORIDA 33133

.....

X 

ALEJANDRO ALONSO / Authorized Representative's signature

(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.817.155, F.S.)

H15000220867 3