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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	o Filing Officer:	
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C. GOLDEN NOV 1 6 2016

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

4770 NW Seventh A	Avenue Prope	rty, LLC	
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	· · · · · · · · · · · · · · · · · · ·		Art of Inc. File
	· · · · · · · · · · · · · · · · · · ·		LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitions Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File R
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature	<del></del>		Fictitious Owner Search
orginature .			Vehicle Search
			Driving Record
Requested by: SETH	11/15		UCC 1 or 3 File
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Name	Date	Time	UCC    Retrieval
Walk-In	Will Pick U	In	Courier

## ARTICLES OF ORGANIZATION FOR IT ORIDA LIMITED LIABILITY COMPANY

FILED

ART	ICLE	<b>[</b> -	Name:
1414	TANK TO		1 1011120

5 Pt. 2: 55

The name of the Limited Liabilit	Company is:		16	NUV 1
4770 NW Seventh A	venue Property, LLC		· ;	. "
(Must end t	vith the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street ad	dress of the principal office o	The Limited Liability Company is:		
Principa	l Office Address:	Mailing Addr	<u>'ess</u> :	
4770 NW Seventh A	/enue	4770 NW Seventh Avenue		
Miami, Florida 3312	en innoperage of which of the regularity in the announcement of a first of the district for personal and the contract of the c	Miami, Florida 33127		
ARTICLE III - Registered Age The Limited Liability Company mother business entity with an a The name and the Florida street a	cannot serve as its own Regis ctive Plorida registration.)	tered Agent. You must designate an inc	Jividual	lor
	Ellahu Abukasis	E - <sup>2,7</sup> .		
	Nam	IG .		
	4770 NW Seventh Avenue			
	Florida street address (P.O.	. Box NOT acceptable)		
•				

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. Thereby 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..

Miami

City

(CONTINUED)

Florida

State

Zip

Page Lof 2

Registered Agent's Signature (REQUIRED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Minager	,
MGR	ELIAHU ABUKASIS
	4770 NW Seventh Avenue
	Miami, Florida 33127
MGR	David Abokusis
	4770 NW Seventh Avenue
	Miami, Florida 33127
	**************************************
(Use attachment if necessary)	
(1)se attachment ii necessary)	•
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