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Florida Department of State
Division of Corporations
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To:

Division of Corporations
 Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
 Account Number : FCA0000000023
 Phone : (850) 222-1092
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LIMITED LIABILITY COMPANY

San Sebastian 33 LLC

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

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JB
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SAN SEBASTIAN 33 LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
128 MORNINGSIDE DRIVE, CORAL GABLES, FL 33133

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Julio Riquenes

Name

128 MorningSide Drive

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

Coral Gables

FL 33133

City, State, and 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 608, F.S.

By:



Registered Agent's Signature

(An additional article must be added if an effective date is requested)



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalty of perjury that the facts stated herein are true.)

Julio Riquenes, Member

Typed or printed name of signer

Filing Fees:

- \$180.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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