

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : DAVID TORCHIN, C.P.A., P.A.

Account Number : 119990000007 Phone : (954)472-3124 Fax Number : (954)472-0067

## LIMITED LIABILITY COMPANY

HTMCB Retail of Coconut Grove, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The undersigned Organizer(s), for the purpose of forming a limited liability company (LLC) pursuant to Chapter 608, Florida Statutes.

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

HTMCB Retail of Coconut Grove, LLC

#### ARTICLE II - Address:

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

Mailing Address:

Street Address:

8211 West Broward Blvd., Suite 200

3015 Grand Avenue

Plantation, FL 33324-2726

Miami, FL 33133

Phone: 954-472-3124

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

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

David Torchin, C.P.A. 8211 West Broward Bivd., Suite 200 Plantation, FL 33324-2726

Having been named as registered agent and to accept service of process for the above state 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 farmiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida State Statutes.

stered Agent

Prepared By:

David Torchin, C.P.A., P.A. 8211 West Broward Blvd., Suite 200 Plantation, FL 33324-2726 Phone: (954) 472-3124 Fax: (954) 472-0067

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### ARTICLE IV - Management (Check Box if Applicable.):

The Limited Liability Company is to be managed by one or more managers and is therefore, a manager managed company.

Ari Corces 3015 Grand Avenue Miami, FL 33133

Ari Corcos

Manager/Organizer

(In arccordance with Section 608.408(3), Florida State Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts state herein are true.)

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#### **ARTICLE V - Effective Date:**

The effective date of the Articles of Organization is:

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SECKLIARY OF STATE
SECRETARY OF STATE

Prepared By: David Torchin, C.P.A., P.A. 8211 West Broward Blvd., Suite 200 Plantation, Fi. 33324-2726 Phone: (954) 472-3124 Fax: (954) 472-0067

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