

Florida Department of State

Division of Corporations
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To:

Division of Corporations

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)541-3694

Fax Number : (305)541-3654

LIMITED LIABILITY COMPANY

473 MENDOZA, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 15, 2001 ...

EMPIRE CORPORATE KIT COMPANY

SUBJECT: 473 MENDOZA, LLC

REF: W01000005944

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SECRETURE E. FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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Division of Corporations - P.O. BOX 6327 - Tallahase

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: 473 Mendoza, UC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 8216 NW 30th Terrace, Miami, FC 33122
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
The name and the Florida street address of the registered agent are: Harvey Hernandez Servace
8216 NW 30th Terrare
Florida street address (P.O. Box NOT acceptable)
Migmi, FL 33122 Some Some Sign 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 confidently with and accept the obligations of my position as registered agent as provided from Chapter 608, F.S Registered agent as provided from Chapter 608, F.S
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. (An additional article must be added in fective date is requested)
Signature of a member or an autility of the presentative of a member.
1
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes at affirmation under the penalties of perjury that the facts stated herein are true.)
Harvey Hernandez Typed or printed name of signee

Filing Fees:

5100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

5 38.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)