

## Division of Corporations

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Katherine Harris, Secretary of State

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To:

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

From:

Account Name : FAS-T CORP, AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346 SECRETARY OF STATE

RECEIVED
02 MAR 12 PH 2: 01
VISION OF CORPORATION

## LIMITED LIABILITY COMPANY TROPICAL PARADISE POINT L.L.C.

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TROPICAL PARADISE POINT L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 13825 SW 88th Street, \$193, Miami, FI 33186.

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

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

OBDULIO M. SALOM

Name

13825 SW 88th Street, #193

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

Miami FL 33182.

City, State, and Zip

Having heen 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 stantes 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.

Registered Agent's Signature

2 MAR 12 AM 9:

Article IV - Management (Check box if applicable.)	
The Limited Liability Company is to be managed by one manager or more man therefore, a manager - managed company.	agers and is
therefore, a manager - managed company.	Bern titter 13
Campado La de Maria	•
(An additional article must be added if an effective date is requeste	ď) ·
578m/ X	
Signature of a member or an authorized representative of a member.	
and an additional representative of a member.	

(In accordance with section 508.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

Miami, Pl 33182.

13825 SW 88th Street, #193

(Member)

Obdulio M. Salom

(Member)

Evarista V. Curbelo

(Member)

Gyorgy Mideczky

(Member)

Antonio Fleitas