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OFFICE USE ONLY(DOCUMENT#)	
LAZARUS CORPORATE FILING SER	VICE
3320 S.W. 87 AVENUE	
MIAMI, FLORIDA (305)552-5973	
TERESA ROMAN (TALLAHASSEE REPRESEN	PATIVE) 9/18 FULL
	OFFICE USI: ONLY
CORPORATION NAME(S) & DOCUMEN	NT NUMBER(S) (if known):
1. NAVARRE 1 REA	HITY, LLC 2 R
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(Corporation Name)	(Document #)
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4. (Corporation Name)	(Document #)
Walk in Pick up time 2.00	Certified Copy
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NEW FILINGS	MENDMENTS SET OF THE PARTY OF T
Profit Amend	
NonProfit Resign	ation of R.A., Officer/Director
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Other Merger	· · · · · · · · · · · · · · · · · · ·
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Annual Report . **********************************	####155.00 *###155.00
Fictitious Name Foreign	
Name Reservation	Partnership
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Other	Examiner's Initials
<u> </u>	EARTHME STREET

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Navarre 1 Realty, LLC

ARTICLE II - Address:

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

323 Navarre Ave. Unit # 108 Coral Gables, Fla. 33134.

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

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

Silvia Ovadia				
Name .				
323 Navarre Ave. Unit # 108				
Florida street address (P.O. Box NOT acceptable)	_			
Coral Gables FL 33134	-			
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..

Registered Agent's Signature

Article IV - Management (Check Dox it applicable.)		
[X] The Limited Liability Company is to be managed by one manager or more manager	gers a	nd is,
therefore, a manager - managed company.	Z g	

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(An additional article must be added if an effective date is requested)	78.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1	8	-
Sele Ond	m ₂	PH	[1]
Signature of a member of an authorized representative of a member.		$\ddot{\omega}$	•
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	ATE	2	
.' Silvia Ovadia Typed or printed name of signee			

Fillog Feet:
\$100.00 Fillog Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)