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Brenda Cherpin Laurent Bernabeu 177 Ocean Lane Dr # 204 Key Biscayne, Fl 33149

Home: 305 365 0186 Portable: 305 481 0209

Fax: 305 365 0723

Email: brendacherpin@yahoo.com



FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

January 28, 2003

BRENDA CHERPIN 177 OCEAN LANE DR. #204 KAY BISCAYNE, FL 33149

SUBJECT: LABREN INVESTMENTS, LTD.

Ref. Number: W03000002519

We have received your document for LABREN INVESTMENTS, LTD. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 903A00005245

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

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

1221 BRICKELL AVE., 9th FLOOR, MIAMI FL 33131

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

LABREN PROPERTIES GROUP, LLC.

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

BRENDA CHERPIN

111 Ocean Tame Dr. Hor#204
Florida street address (P.O. Box NOT acceptable)
Key Birayne FL 33149 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
(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 penalties of perjury that the facts stated herein are true.)
Typed or printed name of signee
Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)