

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone ·

(305) 634-3694

Fax Number

: (305)633-9696

JOVISION OF CORPORATIO

LIMITED LIABILITY COMPANY

SHOPS AT BERKSHIRE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155,00



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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SHOPS AT BERKSHIRE, LLC

ARTICLE II - Address:

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

1922 N.E. 119 Road North Miami, Florida 33181

ARTICLE III - Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Manuel M. Arvesu

Name

201 Alhambra Circle, Suite 502

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

Coral Gables, Florida 33034

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.

ARTICLE IV - Management (Check box if applicable.)

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

Regulated Agent's Signature

remaining of a member of an authorized representative of a member.

(In accordance with section 608.408(3), Piolida Statutes, the execution of this affidavit constitutes and affirmation under the penalties of perjury that the facia stated action are true-)

Alberta Vidal

Typed or printed name of signer

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