## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620

Phone : (608)827-5300 Fax Number : (608)827-5501

## LIMITED LIABILITY COMPANY

ALPINE VENTURES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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# ARTICLES OF ORGANIZATION ALPINE VENTURES, LLC

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#### ARTICLE I

NAME

The name of the limited liability company shall be: ALPINE VENTURES, LLC

### ARTICLE II

#### PRINCIPAL OFFICE

The principal place of business of this Limited Liability Company shall be: 5986 SV Street, Davie, Florida 33314. The mailing address shall be: 2758 NE 15 Street, Apt. 2D, Ft. Lauderdale, Florida 33304.

#### ARTICLE III

## INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1000 West Avenue, Suite 1114, Miami Beach, Florida 33139. Located in the County of Miami-Dade.

#### ARTICLE IV

#### DURATION

The duration for the limited liability company shall be: 12/31/2043.

#### ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

Byron Salguero, 5986 SW 44 Street, Davie, Florida 33314.

Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated 8025 Excelsior Dr., Suite 200, Madison, WI 53717

(608) 827-5300

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: ALPINE VENTURES, LLC

The name and address of the registered agent and office is Business Filings Incorporated, 1000 West Avenue, Suite 1114, Miami Beach, Florida 33139. Located in the County of Miami-Dade.

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Signature:

Mark Schiff, AVP

**Business Filings Incorporated** 

Date: April 22, 2003