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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010300247
Phone : (305) 674-3313
Fax Number : (305) 674-3359

LIMITED LIABILITY COMPANY

FLORIDA INVESTMENT INCOME PROPERTY, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

RECEIVED
03 JUN 30 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 JUN 30 AM 10:59
DIVISION OF CORPORATION
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W-302

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

FLORIDA INVESTMENT INCOME PROPERTY, LLC.

ARTICLE II ADDRESS

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

6400 N ANDREWS AVE SUIT 320

FT. LAUDERDALE, FL 33309

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

RICHARD HARRIS & ASSOCIATES, INC.

6400 N ANDREWS AVE SUIT 320

FT. LAUDERDALE, FL 33309

Having been named as registered agent 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
JAMIE ANKARI

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one member or more members and is, therefore a member - managed company.

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PAGE 2 FLORIDA INVESTMENT INCOME PROPERTY, LLC.



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.

JAMIE ANKARI
Typed or printed name of signer

APPROVED
AND
FILED
03 JUN 30 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA