Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

Prom:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

rb-montoya, llc

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03
\$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:	RB-Montaya,	ردر
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ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
9240 SW 72" St #100	9240 SW 72" St, # 100
Miami, FL 33173	MIQMI, FL 33173

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

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

Maria +	gern	ande	2 - Va	le, Esq
	Name			 / 0
10570 NW	27	56,	Suite	103
Florida street ad	dress (P.	O. Box N	OT acceptal	ole)
Miami		FL	331	72
Cit	y, 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

(CONTINUED)

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40300034008

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
MGR" = Manager MGRM" = Managing Member	
MGROM	Rolanda Benitez
(Rolando Benidez 9240 sw 92 5 # 100 Minni, FL 33173
Use attachment if necessary)	
MTT: An additional natiols m	met ha addad if an affection data is uses unated

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additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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 signoc

Filing Feer:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

S 30.00 Certified Copy (Optional)

3 5.00 Certificate of Status (Optional)

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