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Ţ¢:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : BERRIZ & GIRALDO P.A.

Account Number : I19990000017 Phone : (305)485-9300 Fax Number : (305)485-1098

JIVISION DE CORPORATION

## LIMITED LIABILITY COMPANY

H&G OF MIAMI, LLC.

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILIT COMPANY

OF

H & G OF MIAMI, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

H & G OF MIAMI, LLC.

ARTICLE II - ADDRESS

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

300 BAYVIEW DR # 503 SUNNY ISLES BEACH, FL. 33160

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

PABLO SEBASTIAN SIRE

300 BAYVIEW DR # 503
Florida street address ( P.O.BOX NOT acceptable)

BUNNY ISLES BEACH, FL. 33160 City, State, and Zip

YOHIMA DEL CORRAL 4080 SW 84 AV MIAMI, FL 33155 305-4859300 H03 000 266 881 9

Ho3 000 266 8819.

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

## ARTICLE IV- MANAGEMENT

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

PABLO SEBASTIAN SIRE 300 BAYVIEW DR # 503 SUNNY ISLES BEACH, FL. 33160 MANAGER

LUIS M. MOSCOSO GUTIERREZ 300 BAYVIEW DR # 503 SUNNY ISLES BEACH, FL. 33160

MANAGER

NORA GUILLEN 300 BAYVIEW DR # 503 SUNNY ISLES BEACH, FL. 33180

MANAGER

JESUS HARMAN 300 BAYVIEW DR # 503 SUNNY ISLES BEACH, FL. 33160

MANAGER

(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.)

PABLO SEBASTIAN SIRE
Typed or printed name of signee

Haz 000 266 8819.