

L04000004723

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

LIMITED LIABILITY COMPANY

Faith Associates Real Estate LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

H04000011713

ARTICLE I - Name

The name of the Limited Liability Company is: **Faith Associates Real Estate LLC**

ARTICLE II - Address

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

Principal Office Address:

822 NE 125th Street, Suite 113

No. Miami Beach, FL 33161

Mailing Address:

822 NE 125th Street, Suite 113

No. Miami Beach, FL 33161

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

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

Joan Peters

Name

822 NE 125th Street, Suite 113

(P.O. Box or Mail Drop Box **NOT** Acceptable)

No. Miami Beach, FL 33161

(City / State / Zip)

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TALLAHASSEE, FLORIDA

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 - Joan Peters

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

H04000011713

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Carlos Jamieson - 7910 West Drive, No. Bay Village, FL 33141

MGRM

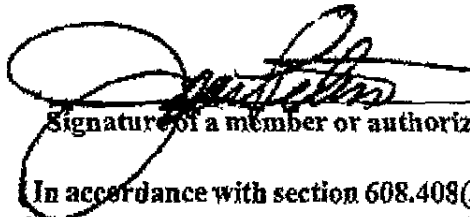
Joan Peters - 2931 SW 87th Terrace, Unit 1911, Davie, FL 33328

MGRM

Doris Arnold - 1440 NW 91st Street, Miami, FL 33147

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Joan Peters

Typed or printed name of signee

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