Division of Corporations Public Access System

### Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H040000136313)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : THE KLEINFELD LAW FIRM

Account Number: 120020000152 Phone: (305)375-9515 Fax Number: (305)358-6541

### LIMITED LIABILITY COMPANY

SEIVISTA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Manu.

Corporate Filing

Public Access Help

Part

Phi lof I

### ARTICLES OF ORGANIZATION OF

# SEIVISTA, LLC A Florida Limited Liability Company

#### ARTICLE I Name

The name of the limited liability company is SEIVISTA, LLC (the "Company").

## ARTICLE II Principal Office

The mailing address and street address of the principal office of the Company is 9325 Lagoon Place, #101, Davie, Florida 33324.

### ARTICLE III Duration

The period of duration for the Company shall be perpetual.

#### ARTICLE IV Management

The Company is to be managed by the managers and the names and addresses of the initial managers are:

Richard Hendricks 9325 Lagoon Place, #101 Davie, Florida 33324

Stephen Lee 915 S.W. 123<sup>rd</sup> Terrace Pembroke Pines, Florida 33025

Jodi-Ann Foster 16520 N.W. 11<sup>th</sup> Court Pembroke Pines, Florida 33028

# ARTICLE V Admission of Additional Members

The limited liability company shall have at least one member. The limited liability company may admit additional members in accordance with the provisions of the operating agreement of the company.

# ARTICLE VI Members' Rights to Continue Business

The death, retirement, resignation, expulsion, dissolution, bankruptcy, dissociation or withdrawal of any member, or the occurrence of any other event that terminates the continued membership of any member shall not cause the Company to be dissolved or its affairs to be wound-up, and upon the occurrence of any such event, the Company shall be continued without dissolution and without any affirmative action or requirement on the part of the members.

KARLEEN FOSTER, Authorized Signatory

SECKE LASSEE FLORID

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.407 OR 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY 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.

- 1. The name of the limited liability company is SEIVISTA, LLC.
- 2. The name and Florida street address of the limited liability company's registered agent is Karleen Foster, One S.E. Third Avenue, Suite 1940, Miami, Florida 33131.

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent.

KARLEEN FOSTER, Registered Agent

O4 JAN 21 AM ID: 53
SECRETARY OF STATE
TALL AHASSEF, FLORID.