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Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

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Corporate Filing

Public Access Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1- Name: The name of the Limited Liability Company is: THE PLACE via BRNYAN, LLC ARTICLE II - Address: The mailing address and screet address of the principal office of the Limited Liability Company is: 3785 NW 82nd Ave., Suite 109, Miami, FL 33166
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
,
SAGRIEL JAKRAU
3785 N.W. 82nd Ave. Suite 109
Florida street address (P.O. Box NOT acceptable)
<u> Міяні</u> Б. 33166
City, State, and Zip
Having been named as registered agent and to accept service of process for the above stated limited
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
relating to the proper and complete performance of my duties, and I am familiar with and accept the
obligations of my position as registered agentas provided for in Chapter 608. F.S.
Regimered Agent's Signature
Article IV - Management (Check box if applicable.)
The Limited Liability Company is to be managed by one manager or more managers and is,
therefore, a manager - managed company.
(An additional article Aust be added if an effective date is requested)
Signature of a mamper 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 facus stated herein are true.)

CARRIEL ARRAU
Typed or printed name of signer

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