

L040000015347

Florida Department of State
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.

((H04000041399 3)))

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 : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

CORAL POINTE APARTMENTS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
RECEIVED
04 FEB 26 AM 11:24
FEB 26 AM 7:59
DIVISION OF CORPORATION

③

H040000041399

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Coral Pointe Apartments, LLC

ARTICLE II - Address:

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

Principal Office Address:

6538 Collins Ave

Suite 187

Miami Beach, FL 33141

Mailing Address:

6538 Collins Ave

Suite 187

Miami Beach, FL 33141

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

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

Maria Fernandez Valle, Esq

Name

10570 NW 27 Street, Suite 103

Florida street address (P.O. Box NOT acceptable)

Miami FLORIDA, 33172

City, 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, Florida Statutes.



Registered Agent's Signature

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 FEB 26 AM 11:21

H040000041399

HD4000041399

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Osmara Vasquez
6538 Collins Ave, Suite 187
Miami Beach, FL 33141

MGRM

Vicente Carrodegua
6538 Collins Ave, Suite 187
Miami Beach, FL 33141

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

MARIA Fernandez-Vall

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.)

[Signature]
Typed or printed name of signer

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 FEB 26 AM 11:21

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

HD4000041399