# L04000019478

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(Requestor's Name)  (Address)	600029454126	
(City/State/Zip/Phone #)	03/02/0401062020 **160.00	
(Business Entity Name)  (Document Number)		
Special Instructions to Filing Officer:	041667 - 2 PH h: 3	
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Note Brave gave
AUTHORIZATION BY PHONE TO
CORRECT MUMANE CORP From Name
DATE 3/13/04
DOC. EXAM DOC

### TRANSMITTAL LETTER

	Registration Section Division of Corporations		
SURIFC	2780 Development Corp. LLC		
	(Name of Limited Liability Company)		
Please return all correspondence concerning this matter to the following			
	Waiter Bravo		
	(Name of Person)		
•	(Firm Company)		
	570 Golden Beach Dr.		
والمستد	(Address)		
	Miami, FL 33160		
	(City/State and Zip Code)		
For furth	er information concerning this matter, please call: email: waiterb@davoucci.com		
Walte	er Bravo 917 673-2375		
	(Name of Person) (Area Code & Daytime Telephone Number)		

STREET ADDRESS: Begistration Section ..... 409 E. Gaines Street Tallahussee, Florida 32399 MAILING ADDRESS: Benistration Section ..... F.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - A	2780 Development	LLC	
***************************************		e principal office of the Limited Lia	bility Company is:
Principal Office Address: 570 Golden Beach Dr Miami, FL 33160		Mailing Address:	
		2761 NE 48 Ct Lighthouse Point, FL 33064	
	570 Golden Bea	ame  ch Dr.  (P.O. Box <u>NOT</u> scceptable)	FILED
	570 Golden Bea	ch Dr. (P.O. Box <u>NOT</u> secreptable)	! * ·
	570 Golden Bea Florida street address Miarni	ch Dr. (P.O. Box <u>NOT</u> scceptable)	

Page 1 of 2 (CONTINUED)

### ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Sal Migliore 2761 NE 48 Ct
	Lighthouse Point, FL 33064
MGR	Walter Bravo
	570 Golden Beach Dr.
	Miami, FL 33160
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a member or an	tuthorized representative of a member.
(In accordance with section 60) of this document constitutes and that the facts stated herein are to	408(3), Florida Statutes, the execution affirmation under the penalties of perjury the.)
Walter Brav	<b>o</b> .
Typed or p	rinted name of signee

#### 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)