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(Re	equestor's Name)	
(Ac	ldress)	
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Investrix LLC			
(Name of Limited Liability Company)			
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Michael Curtin			
(Name of Person)	<u> </u>	0	
Investrix LLC	7.	O4 HAR I	«ي ايا »
(Firm/Company)	XS.	~	1.0 <u>1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 </u>
531 SE 5th Ct.		7	
(Address)	LORIE	9:2	्रक्ता स्थापन
Pompano Beach, FL 33060		ယ်	
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Michael Curtin at (954) 267-8332 (Name of Person) (Area Code & Daytime Telephone Number	er)		

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	OL MA
Investrix LLC	SS 2
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
531 SE 5th Ct.	531 SE 5th Ct.
Pompano Beach	Pompano Beach
FL, 33060	FL, 33060
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the regist Michael Curtin	
Name	
531 SE 5th Ct.	
Florida street address (P.O. Box	(<u>NOT</u> acceptable)
Pompano Beach,	FLORIDA 33060
City, State, and Zi	p
g been named as registered agent and to accept service of any at the place designated in this certificate, I hereby ac to act in this capacity. I further agree to comply with the	ccept the appointment as registered agent and

Having compa agree to 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

Page 1 of 2 (CONTINUED)

$\frac{\textbf{Title:}}{\text{"MGR"}} = \textbf{Manager}$	me and Address:
WOK - Wallager	-
"MGRM" = Managing Member	Iember(s): anaging Member is as follows: me and Address: Chael Curtin
MGRM Mid	chael Curtin
53	1 SE 5th Ct.
Poi	mpano Beach, FL 33060
MGRM De	rick Warren
72	51 NW 24th Ct.
Ma	rgate, FL 33063
MGRM Vid	etor Hijuelos
177	70 NE 49th Ct.
Po	mpano Beach, FL 33064
MGRM Pec	dro Llaguno
842	20 Dundee Terrace
Mia	ami Lakes, FL 33016

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

REQUIRED SIGNATURE:

Signature of a plember 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.)

Michael Curtin

Typed or printed 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)