

L04000030448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

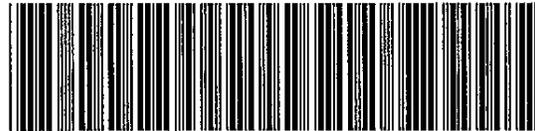
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECORDED
04 APR 21 AM 10:54
DIVISION OF REGISTRATION

FILED
04 APR 21 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

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TALLAHASSEE, FLORIDA

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. GENUINE TRUST APPRAISAL LLC
(Corporation Name) (Document #)
- 2. _____
(Corporation Name) (Document #)
- 3. _____
(Corporation Name) (Document #)
- 4. _____
(Corporation Name) (Document #)

- Walk in Pick up time 2:00 Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF ORGANIZATION
FOR**

(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

ARTICLE I – Name:

The name of the limited liability company is
Liability Company”). GENUINE TRUST APPRAISAL LLC

(the “Limited

ARTICLE II – Duration:

The period of duration for the Limited Liability Company shall commence on the date on which these Articles of Organization are filed with the Department of State of the State of Florida, and shall be perpetual.

ARTICLE III – Purpose:

The Limited Liability Company is formed to engage in any lawful act or activity for which limited liability companies may be organized under the Florida Limited Liability Company Act. (Section 608.401, et. Seq., Florida Statutes).

ARTICLE IV – Address:

The mailing and street address of the principal office of the Limited Liability Company shall be

3190 S.W. 73 AVE RD
MIAMI, FL 33155

ARTICLE V – Management:

The management of the Limited Liability Company is reserved to the members. The members of the Limited Liability Company are:

Oreste V. Llorente
3190 S.W. 73 AVE RD
MIAMI, FL 33155

David Ruz
1221 S.W. 122 AVE Apt 401
MIAMI, FL 33184

ARTICLE VI – Registered Agent:

The registered agent for service of process on the Limited Liability Company shall be

Oreste V.Llorente
3190 S.W. 73 AVE RD
MIAMI, FL 33155

ARTICLE VII – Debt and Contractual Liability

Any member may contract debt and/or incur contractual liability by or on behalf of the Limited Liability Company.

IN WITNESS WHEREOF, the undersigned hereby affirm under the penalties of perjury that the facts stated hereinabove are true and have executed this instrument as of this 20 day of April, 2004



ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

Having been named to accept service of process for the above stated Limited Liability Company, _____ states that he is familiar with and hereby agrees to act in this capacity, and agrees to comply with the obligations of said position.

Dated this 20 day of April, 2004.

By: 