

L040000049001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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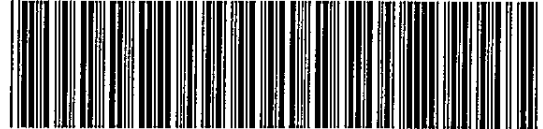
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE

6-29-04

TRANSMITTAL LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EBP Parce 13, 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:

Katherine Rey
(Name of Person)

(Firm/Company)

17755 Homestead Ave #109
(Address)

Miami FL 33157
(City/State and Zip Code)

For further information concerning this matter, please call:

Katherine Rey at (305) 252-0139 x109
(Name of Person) (Area Code & Daytime Telephone Number)

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

SEC. 1-1-1
TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is: **EBP PARCEL 3, LLC**

ARTICLE II - Address:

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

**17755 Homestead Avenue
Miami, FL 33157**

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

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

KATHERINE REY

Name

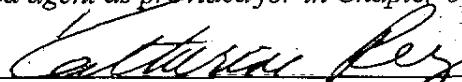
17755 HOMESTEAD AVENUE, SUITE 109

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

MIAMI, FL 33157

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, F.S.



Registered Agent's Signature

ARTICLE IV- Managers

**EDWARD HANNA, Manager
17755 Homestead Avenue
Miami, FL 33157**

ARTICLE IV- Managers

The Effective Date of this filing shall be June 29, 2004.

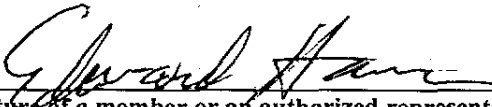
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TALLAHASSEE, FLORIDA

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6-29-04


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.)

WEST PERRINE COMMUNITY DEVELOPMENT CORPORATION, INC.

Edward Hanna
Typed or printed name of signee

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