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Case A1

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Division of Corporations

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**To:**

**Division of Corporations**

**Fax Number : (850) 205-0383**

**From:**

**Account Name : CORPORATE CLEARANCE CORP.**

**Account Number : I20000000011**

**Phone : (718) 888-7773**

**Fax Number : (718) 888-8559**

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**DIVISION OF CORPORATION**

**LIMITED LIABILITY COMPANY**

**MEWS Triplex, LLC**

Certificate of Status	0
Certified Copy	1
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDAARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY  
OF**MEWS Triplex, LLC**

FIRST: The name of the Limited Liability Company is:

**MEWS Triplex, LLC**

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

**5151 Collins Avenue, Suite 1424, Miami Beach, FL 33140**

THIRD: The name and the Florida street address of the registered agent is:

**Rodney Hakimian**  
**5151 Collins Avenue, Suite 1424, Miami Beach, FL 33140**


*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.*



Rodney Hakimian, Registered agent

FOURTH: The Limited Liability Company is NOT a manager-managed company.

*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.*



Rodney Hakimian, Member

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