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(Rec	questor's Name)	
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(City	y/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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ALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Se Division of Cor			
SUBJECT:		ESTATE INVESTMENTS, L.	L.C.
	(Name of Limited	l Liability Company)	
The enclosed Articles of	Organization and fee(s) are su	abmitted for filing.	
Please return all correspondent	ondence concerning this matter	r to the following:	
· ·· <u></u>		DYA LEWIS	
	4)	Name of Person)	
	, <u>.</u> (I	Firm/Company)	일
			喜
	13524 SW	/ 118TH PATH	
		(Address)	2004 OCT 25 PM 1: UO  WALLAHASSEE, FLORID
			2 2 2
		ORIDA 33186 State and Zip Code)	
	(City/	State and Zip Code)	50 74
For further information	concerning this matter, please	call:	5,
ROGET V. BRYAN, E	SQ.	at ( 305 ) 984-3326	
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	or the following amount:		
<b>3</b> \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ET ADDRESS:	MAILING A Registration S	

Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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 L	iability Compan	y is:		2004 OT - 100 P
TRINI ELEI	MENTS REAL ES	TATE INVES	STMENTS, L.L.C.	X 25
ARTICLE II - Address: The mailing address and st	reet address of the	he principal	office of the Limited	d Liability Company is:
Principal Office Address	<u>.</u>	<u>Mail</u>	ing Address:	ORION OF
13524 SW 118TH PATH MIAMI, FLORIDA 33186	<del></del>		SW 118TH PATH	<del></del>
	<del></del>	-	······································	.,
The name and the Florida	LATOY	the register A LEWIS	ed agent are:	—· · · · · · · · · · · · · · · · · · ·
	13524 SW	118TH PATE	1	
Towns on the second of the sec	Florida stre	et address (P.	O. Box NOT acceptable)	
· · .	MIAMI,	FL_	33186	
	City, S	tate, and Zip	***	•
Having been named as reg liability company at the registered agent and agree statutes relating to the pr accept the obligations	e place designated to act in this cap coper and comple of my position as	d in this cert pacity. I fur te performa	tificate, I hereby accepther agree to comply need for my duties, and agent as provided for a	pt the appointment as with the provisions of all I am familiar with and

(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" = Manag	ger	Name and Address:	
"MGRM" = Man	aging Member		
MGRM		LATOYA LEWIS	
·		13524 SW 118TH PATH	
s remain	· · · · · · · · · · · · · · · · · · ·	MIAMI, FLORIDA 33186	
		<del></del>	<u>بر</u> ي
MGRM		MARVA LEWIS	
	•	13524 SW 118TH PATH	<u> </u>
	_	MIAMI, FLORIDA 33186	<u> </u>
			$\mathcal{E}_{\chi_{\mathcal{C}}}$
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(I Inn. 1440 alamanus	:C		
(Use attachment	ii necessary)		
NICOTOTE A. J.J.	:4:14:14 l	added if an effective date is requested	J
NOTE: An add	itional article must be	added if an effective date is requested	1.
REQUIRED SI	CNATIDE.		
REQUIRED SI	GNATURE.		
	00		
	Mail		
-	Signature of a member or	an authorized representative of a member.	, ,
		n 608.408(3), Florida Statutes, the execution as an affirmation under the penalties of perjury in are true.)	
	1. Tun	Lawie	
	Typed	or printed name of signee	<del></del> ·

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)