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**ARTICLES OF ORGANIZATION**

**FOR**

**CITYWIDE FINANCIAL LLC**

FILED  
04 DEC -3 AM 8:06  
STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - NAME:**

The name of this Limited Liability Company ("Company") shall be:

**CITYWIDE FINANCIAL LLC**

**ARTICLE II - ADDRESS**

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

3110 NE 2<sup>nd</sup> Avenue

Miami, FL 33137

**ARTICLE III - MANAGEMENT**

The Company shall be a manager-managed limited company, and its manager or managers shall be appointed and serve in the manner provided in the Company's operating agreement.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

  
\_\_\_\_\_  
Signature of a Member Representative

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **CITYWIDE FINANCIAL LLC**
  
2. The name and the Florida street address of the registered agent are:

**MICHAEL SAMUEL  
3110 NE 2<sup>ND</sup> AVENUE**

**MIAMI, FLORIDA 33137**

*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.*

By: \_\_\_\_\_

  
**MICHAEL SAMUEL**