U5000015107 Florida Department of State

Division of Corporations
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31VISION OF CORPORATION

Division of Corporations

Fax Number : (850) 205-038:

i.

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255
Phone: (305)634-3694
Fax Number: (305)633-9696

LIMITED LIABILITY COMPANY

castillo ocean view II, llc

Certificate of Status	9
Certified Copy	1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

CASTILLO OCEAN VIEW II, LLC

ARTICLE I

The name of the Limited Liability Company shall: CASTILLO OCEAN VIEW II, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company is: 18246 COLLINS AVENUE, SUNNY ISLES, FLORIDA 33160

ARTICLE IV

The name and the Florida street address of the registered agent are: KARINA KLEE, 18246 COLLINS AVENUE, SUNNY ISLES, FLORIDA 33160

ARTICLE V

The name of Manager of this company shall be:

MANAGER ANA M. CASTILLO OLIVARES

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

KARINA KLEE -Registered Agent

Signature of a member of 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 facis stated herein are true.)

Typed or printed name of signee

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