

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

SHAISTON OF CORFORATION : EMPIRE CORPORATE KIT COMPANY Account Name

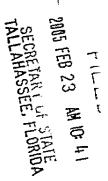
Account Number : 072450003255 : (305)634-3694

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LIMITED LIABILITY COMPANY

brickell 1909 llc

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| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$125.00 |







ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

BRICKELL 1909 LLC

ARTICLE I

The name of the Limited Liability Company shall: BRICKELL 1909 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: 18033 SW 29th LANE, MIRAMAR, FL 33029

ARTICLE IV

The name of the Managing Members shall be:

ANTONIO AGOSTI

MARIA BEATRIZ FRIKE

ARTICLE V

The name and the Florida street address of the registered agent are: DEBORA RAMOS, 18033 SW 29th LANE, MIRAMAR, FL 33029



UNHOODUS 7628



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

Brickell 1909 LLC

(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.

Registered Agent

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.)

Debora Ramos

Typed or printed name of signee

MARTHUSTICK