

# L05000026782

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850) 205-0383

**From:**

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

## LIMITED LIABILITY COMPANY

**n.b. landing rb-gem llc**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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③

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

N.B. Landing RB-GEM LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4937 S.W. 75 Ave.

4937 S.W. 75 Ave.

Building B Unit 21

Building B Unit 21

Miami, Florida 33155

Miami, Florida 33155

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

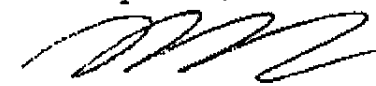
The name and the Florida street address of the registered agent are:

Maria Fernandez-Valle  
Name

10570 N.W. 27<sup>th</sup> Street, Unit 103  
Florida street address

Miami, Florida 33172  
City, State, and Zip

*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, Florida Statutes.*

  
\_\_\_\_\_  
Registered Agent's Signature

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**ARTICLE IV - Manager(s) or Managing Member(s):**

The name and address of each Manager of Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM \_\_\_\_\_

RB-GEM Management LLC \_\_\_\_\_

4937 S.W. 75 Ave. \_\_\_\_\_

Building B Unit 21 \_\_\_\_\_

Miami, Florida 33173 \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
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.)

Maria Fernandez-Vallie

Typed of printed name of signer

**Filing Fees:**

\$100.00 Filing fee for Article of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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