

LO5000038000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

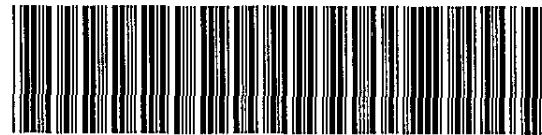
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 19 2005
2005 APR 19 PM 1:46
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WE
REGISTRATION
DEPARTMENT
TALLAHASSEE, FLORIDA
J. BRYAN APR 19 2005

Charter Number Only

4/18

Bichara Ceballos & Hawra
Requestor's Name
1405 SW 107 Ave #301B
Address
MIAMI FL 33174
City State ZIP Phone
(305)220-6835 A

VALIDATION ONLY

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ALLAMASSE, FLORIDA
U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

CORPORATION(S) NAME

Bichara-Gonzalez Venetia, LLC



Empire Toll Free: 1-800-432-3028

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> NonProfit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution	<input type="checkbox"/> Mark
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input checked="" type="checkbox"/> Other <u>LLC</u>
<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Reservation	<input type="checkbox"/> Change of Registered Agent
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photo Copies	<input type="checkbox"/> Certificate Under Seal
<input checked="" type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
		<input type="checkbox"/> Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I – NAME

The name of the Limited Liability Company is:

BICHARA-GONZALEZ VENETIA , LLC

ARTICLE II – Address:

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

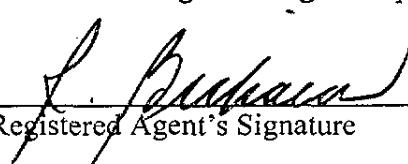
**1405 SW 107th Avenue, Suite 301-B
Miami, Florida 33147**

ARTICLE III – Registered Agent, Registered Office and Registered Agent's Signature:

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

**RICARDO BICHARA
1405 SW 107th Avenue, Suite 301-B
Miami, Florida 33174**

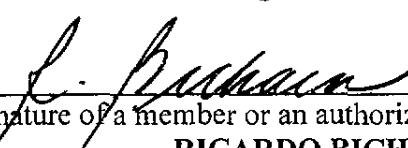
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as the registered agent as provided for in Chapter 608, F.S.



Registered Agent's Signature

ARTICLE IV – Management

The Limited Liability Company is to be managed by one manager or more managers and is, a manager – managed company.



Signature of a member or an authorized representative of a member.
RICARDO BICHARA, MANAGER

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

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ALLAHASSEE, FLORIDA
INFORMATION