

# L05000038536

Florida Department of State  
Division of Corporations  
Public Access System

## Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H05000097092 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

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

DIVISION OF CORPORATION

05 APR 20 AM 7:58

RECEIVED

## LIMITED LIABILITY COMPANY

urbana group, llc

Name Availability	
Document Examiner	DCC
Updater	DCC
Undater	DCC
Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE  
FLORIDA

2005 APR 20 A 9:43

FILED

(2)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

Urbana Group, LLC.

ARTICLE II - Address:

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

15 W. Star Island Drive, Miami Beach, Florida 33139

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

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

Amarilis Moran Osorio  
15 W. Star Island Drive  
Miami Beach, Florida 33139

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.

  
Registered Agent's 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.)

Amarilis Moran Osorio  
Typed or printed name of signee

FILED

2015 MAR 20 A 9:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H050000092