

W5000041212

Florida Department of State
Division of Corporations
Public Access System

③

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MJH

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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

RECEIVED
05 APR 26 AM 8:03
DIVISION OF CORPORATION

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LIMITED LIABILITY COMPANY

urban properties, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
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③

ARTICLES OF ORGANIZATION
OF

A Florida Limited Liability Company

ARTICLE I-NAME

The name of the Limited Liability Company is:

URBAN PROPERTIES, LLC.

ARTICLE II-ADDRESS:

The mailing address and street address of the principle office of the Limited Liability company is:

PRINCIPAL OFFICE ADDRESS:

5845 N.W 194TH STREET MIAMI FLA 33015

MAILING ADDRESS:

5845 N.W 194TH STREET MIAMI FLA 33015

ARTICLE III- REGISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE:

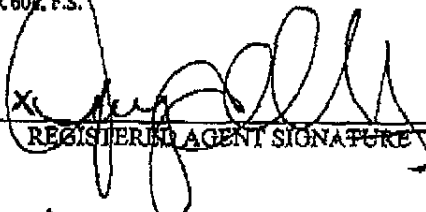
The name and the Florida street address of the registered agent are:

JOYCE HOWARD
(NAME)

5845 N.W 194TH STREET
FLORIDA STREET ADDRESS (P.O BOX NOT ACCEPTABLE)

MIAMI FLA 33015
CITY, STATE, AND ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS 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 SIGNATURE

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ARTICLE IV - MANAGEMENT/MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title:

Name and address:

MGR= Manager

MGRM= Managing Member

MGR= JOYCE HOWARD

5845 N.W 194TH STREET MIAMI FLA 33015

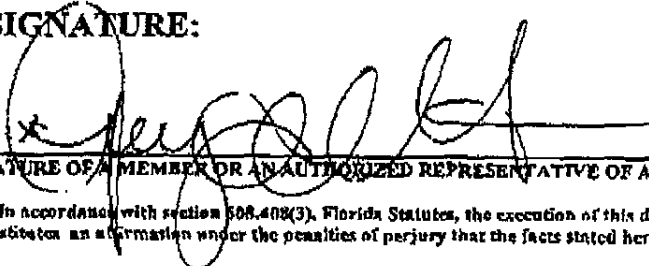
MGR= THERESA WILSON

5845 N.W 194TH STREET MIAMI FLA 33015

(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 508.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JOYCE HOWARD
Typed or printed name of signer

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