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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

larb commercial properties llc

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

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ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LARB Commercial Properties LLC	
ARTICLE II - Address: The mailing address and street address of the principal off is:	fice of the Limited Liability Company
Principal Office Address:	Mailing Address:
4937 S.W. 75 Avc.	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	
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

Page 1 of 2 (CONTINUED)

ARTICLE IV - Mauager(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 Mismi, Florida 33173
	i
(Use attachment if necessary) NOTE: An additional article must be added if ar	n effective date is requested.
REQUIRED SIGNATURE: Signature of a member or an authorize (In accordance with section 608,408(3) of this document constitutes an affirmation that the facts stated here.	ed representative of a member. A Florida Statutes, the execution ion under the penaltics of perjury

Maria Fernandez-Valle
Typed of printed name of signee

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)

Page 2 of 2

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