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Florida Department of State  
Division of Corporations  
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Electronic Filing Cover Sheet

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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

SECRETARY OF STATE  
TALLahassee, FLORIDA

05 MAY -6 AM 8:34

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RECEIVED  
MAY 9 - 6 AM 7:57  
DIVISION OF CORPORATIONS

**LIMITED LIABILITY COMPANY**

**west bird investments 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:

West Bird Investments LLC

ARTICLE II - Address:

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

Principal Office Address:

4937 S.W. 75 Ave.

Building B Unit 21

Miami, Florida 33155

Mailing Address:

4937 S.W. 75 Ave.

Building B Unit 21

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

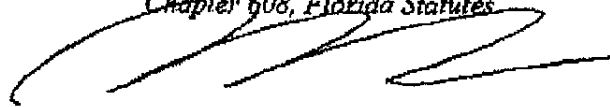
Miami, Florida 33172

City, State, and Zip

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05 MAY -6 14 8:34  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

*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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Page 1 of 2  
(CONTINUED)

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

The name and address of each Manager or 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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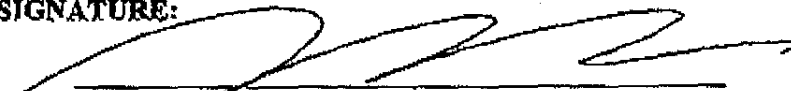
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(Use attachment if necessary)

**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-Valle

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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FLORIDA

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