# Florida Department of State

**Division of Corporations** Public Access System

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o To:

Division of Corporations

Fax Number

: (850)205-0383

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number: 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

## LIMITED LIABILITY COMPANY

ler real estate invesmtents, llc

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

MJH



ARTICLE I - Name

# H05000120094

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

The name of the Limited Lizbility Company is:	
IER REAL ESTATE INVESTMENTS.	LLC
ARTICLE II - Address: The mailing address and street address of the princi	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3575 N.E. 207TH STREET, SUITE B-5	2155 HELSMAN DRIVE #M12
AVENTURA, FL 33180	AVENTURA, FL 33180
ARTICLE III - Registered Agent, Registered Of	fice, & Registered Agent's Signature
The name and the Florida street address of the regis	stered agent are:
RUTH RUCHELSMAN Name	OS MAY
21155 HELSMAN DRIVE, #M12 Florida street address (P.O. Box M	

Having been named as registered agent and to accept service to process for the above stated liability company of 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 in Chapter 608, F.S.

Registered Agent's Signature

AVENTRUA, FL 33180

City, State and Zip

(CONTINUED)

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#JRTOT	
ARTICLE IV - Manager(s) of Managing M The name and address of each Manager or Ma	lember(s): (   UUUU U   LU anaging Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	RUTHRUCHELSMAN
	21155 HELSMAN DRIVE, #M12
·	AVENTURA FL 33180
MGRM	GABRIEL RUCHELSMAN
	21155 HELSMAN DRIVE. #M12
	AVENTURA FL 3318
(Use attachment if necessary)	· .
NOTE: An additional article must be added	if an effective date is requested.
REQUIRED SIGNATURE:  Signature of member of	Establishment and a member and a member
(In accordance with section 608.408(3), Fig. aftirmation under the penalties of perjury the	orida Statutes, the execution of this document constitutes an
Filing Fees:	na tierre of sièlles
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)