

W5000049344



8065 LOS PINOS CIRCLE, CORAL GABLES, FL 33145



100053892331

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

W5-49344  
OK

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

ROYAL OAK HOMES LLC

Royal Oak Homes LI

**ARTICLE II - Address:**

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

**Principal Office Address:**8065 LOS PINOS CIRCLE  
CORAL GABLES FL 33143**Mailing Address:**8065 LOS PINOS CIRCLE  
CORAL GABLES FL 33143**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

ADOLFO SKRANDE

Name

8065 LOS PINOS CIRCLE

Florida street address (P.O. Box **NOT** acceptable)

CORAL GABLES 33143

FL

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, F.S..*

  
Registered Agent's Signature

(CONTINUED)

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**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:**

MGR

ADOLFO SKRANDE

8065 LOS PINOS CIRCLE

CORAL GABLES FL 3143

MGR

FRANCISCO GARCIA *J. GARCIA TH*  
*5920 SW 83 ST*  
*SOUTH MIA 33143*

(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.)

ADOLFO SKRANDE

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)