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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

05 MAY 24 AM 9:04
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
05 MAY 24 PM 3:57
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

BROTHER & SISTER INVESTMET LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BROTHER & SISTER INVESTMENT LLC

ARTICLE II - Address:

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

Principal Office Address:

691 W. 24 ST.
MIAMI, FL. 33010

Mailing Address:

691 W. 24 ST.
MIAMI, FL. 33010

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

MIGUEL ALVAREZ

Name

691 W. 24 ST.

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

MIAMI FL 33010

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 MAY 24 AM 9:04

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BO5000131120 3

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
" MGR "	MIGUEL ALVAREZ 691 W. 24 ST. HIALEAH, FL. 33010
" MGRM "	JOSE LUIS ALVAREZ 2366 W. 6 LANE HIALEAH, FL. 33010
"MGRM"	ISMARY ALVAREZ 2445 W. 6 LANE HIALEAH, FL. 33010
" MGRM "	ANA ALVAREZ 671 W. 25 ST. HIALEAH, FL. 33010

(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.)

MIGUEL ALVAREZ
Typed or printed name of signer

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)

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