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Florida Department of State

Division of Corporations Public Access System

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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

ricardo 47, l.l.c.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00





ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

RICARDO 47, L.L.C.

ARTICLE I

The name of the Limited Liability Company shall: RICARDO 47, L.L.C.

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company is: 10556 N.W. 26TH STREET, D-101, DORAL, FL 33172

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The name of the Manager(s) for this Company shall be:

MANAGERS

RICARDO ECHEVERRIA

7102 N.W. 112 COU

DORAL, FL 33178

YVETTA ALAM ECHEVERRIA

7102 N.W. 112 COUR T

DORAL, FL 33178

ARTICLE V

The name and the Florida street address of the registered agent: CABANAS & ASSOCIATES, P.A., 10520 N.W. 26TH STREET, C-201, DORAL, FL 33172

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

RICARDO 47, L.L.C.

(Name of Company)

Having been name as Registered Agent and to accept service of process for the above stated Limited Liability Company at the place designated in the Articles of Organization, 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.

Савацаѕ & Associates, р.а. .

Registered Agent

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 penaltics of perjury that the facts stated herein are true.)

JOSEPH F. CABANAS

Typed or Printed Name of Signee

AY 26 AM IO: 00

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