

LD5000060843

Florida Department of State
Division of Corporations
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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

FILED
05 JUN 17 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
05 JUN 17 PM 12:38
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

7575bh516

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

③

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

7575BH516 LLC

Article II - Address:

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

Principal Office Address:

18206 COLLINS AVE
SUNNY ISLES, FL
33160

Mailing Address:

18206 COLLINS AVE
SUNNY ISLES, FL
33160

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

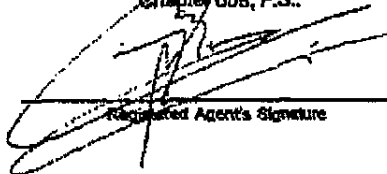
The name and the Florida street address of the registered agent are:

HERNAN GLEIZER
Name

18206 COLLINS AVE.
Florida street address (P.O. Box NOT acceptable)

SUNNY ISLES, FL 33160
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

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ARTICLE IV - Management / Member(s):
The name(s) and address(es) of each Manager or Managing Member is as follows:
7575 BH 516 LLC

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGR

HERNAN GLEIZER
18206 COLLINS AVE
SONNY ISLES, FL 33160

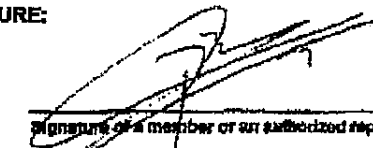
MGR

MARIANO KARNER
18206 COLLINS AVE
SONNY ISLES, FL 33160

(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 605.406(3), Florida Statutes,
the execution of this document constitutes an affirmation under
the penalty of perjury that the facts stated herein are true.)

HERNAN GLEIZER

Typed or printed name of signer

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