L05 0000 655 30

(Re	questor's Name)	- · · · · · · · · · · · · · · · · · · ·
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Doe	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filling Officer:	
	M	
	<u> </u>	

Office Use Only



000056329550

07/01/05--01034--005 **130.00



FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

(City, State, Zip)

(Phone #)

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

Other

CR2E031(10/92)

	1. <u>Ce sy's fi</u>	OOR 5, 2, C, C.	
	(Corporati	on Name)	(Document #)
	2. (Corporation	on Name)	(Document #)
	3. (Corporation	on Name)	(Document #)
	4. (Corporati	on Name)	(Document #)
	•	ck up time 2.05	Certified Copy
	Mail out W	Vill wait Photocopy	Certificate of Status
	NEW FILINGS	AMENDMENTS	
	Profit	Amendment	-
	NonProfit	Resignation of R.A., Office	r/Director
Х	Limited Liability	Change of Registered Ager	nt
	Domestication	Dissolution/Withdrawal	
	Other	Merger	
	OTHER FILINGS	REGISTRATION/ QUALIFICATION	·
	Annual Report	Foreign	
	Fictitious Name	Limited Partnership	
	Name Reservation	Reinstatement	
		Trademark	Examiner's Initials
		, , —	LARMING O MINGS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Compar		
Principal Office Address:	Mailing Address:	
2655 Lefeune Road #507	2655 Lefeure Road #507	
Coral Gables	Coral Gables	
Florida 33134	Florida 33134	
The name and the Florida street address of the	on the state of the	
Filings, Inc.	e registered agent are:	
Filings, Inc. Nan 3732 N. W. 16th S	e registered agent are:	
Filings, Inc. Nam 3732 N. W. 16th S Florida street address (1) Fort Lauderdale	e registered agent are:	
Filings, Inc. Nam 3732 N. W. 16th S Florida street address (1) Fort Lauderdale	re registered agent are: **Treet** P.O. Box NOT acceptable) **FLORIDA 33311 **e, and Zip **service of process for the above stated limited livereby accept the appointment as registered agent with the provisions of all statutes relating to the liliar with and accept the obligations of my positions.	

Page 1 of 2 (CONTINUED) ARTICLE IV- Manager(s) or Managing Member(s):

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

ngr	Francisco Crespo
	2655 Lefeune Road #507
	Coral Gables, Florida 33134
1 <i>GR</i>	Bernando Gremli
	2655 Lefeune Road #507
	Coral Galles, Florida 33134
mgR ···	Alberto Wllconard
	2655 Lefeune Road #507
	Coral Galles, Florida 33134

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.)

Teresa Roman

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fce for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)