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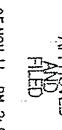




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SECRETAIN OF STATE TALLAHASSEE, FLORIDA



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ZERBLANC AT TRADITION, LLC		
(Name of Limited	Liability Company)	
The enclosed Articles of Organization and fee(s) are su	ibmitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
Zulay E Ripol		
1)	Vame of Person)	
ZERBLANC AT TRADITION, LLC		
	Firm/Company)	
4318 Laurel Ridge Circle		
	(Address)	
Weston, FL 33331		
(City/	State and Zip Code)	
For further information concerning this matter, please	call:	
Miguel Ripol	at (954) 214-3783	
(Name of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for the following amount:		
\$ \$125.00 Filing Fee \$ Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations	MAILING A Registration S Division of C	Section

409 E. Gaines Street Tallahassee, Florida 32399

P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:		
ZERBLANC AT TRADITION, LLC			
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Lial	bility Comp	any is:
Principal Office Address: Mailing Address:			
4318 Laurel Ridge Circle	4318 Laurel Ridge Circle		
Weston, FL 33331	Weston, FL 33331		
The name and the Florida street address of the registered agent are: Zulay E Ripol		SECRE	.02 NO 11 PH 2: 06
Name Sg.		=	
4318 Laurel Ridge Circle		المارية البارية	P
Florida street address (P.O. Box NOT acceptable)		HOH HISTA	3
Weston, FL 33331	- FL	图出	90
City, S	State, and Zip		
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d in this certificate, I hereby accept the pacity. I further agree to comply with t ete performance of my duties, and I am	e appointmer the provision familiar wit	nt as ns of all th and

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Zulay E Ripol
	4318 Laurel Ridge Circle
	Weston, FL 33331
MODIA	Franklin Obasin
MGRM	Freddy Chacin
	4459 Fox Ridge Drive Weston, FL 33331
	weston, FL 33331
MGRM	Joaquin Izquierdo
-	3913 Vista Grove Lane
	Weston, FL 33332
MGRM	
Luis Brityer	Luis Rotver
	10027 Winding Lake Road #46-102
	Sunrise, FL 33165
Oliver attenders out if a consequence	
(Use attachment if necessary)	See attachment
NOTE: An additional article	must be added if an effective date is requested.
REQUIRED SIGNATURE:	
	•
$\overline{}$	1-NJap -
Simple of a	nember or an authorized representative of a member.
Signature of a f	nember or an authorized representative of a member.
of this documen	with section 608.408(3), Florida Statutes, the execution t constitutes an affirmation under the penalties of perjury stated herein are true.)
Zulay E Ripol	
 	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)

* Addendum to Articles of Organization for:

ZERBLANC AT TRADITION, LLC

Article VI

Additional Managing Member:

MGRM

Marisela Zambrano 495 Talavera Road Weston, FL 33326

SECRETARY OF STATE

APPHOVED PARIOUS