

L06000002705

Division of Corporations

Page 1 of 1

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000005057 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:  
Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000146  
Phone : (305)444-4994  
Fax Number : (305)444-4977

FLORIDA/FOREIGN LIMITED LIABILITY CO.

TAMACH AIRPORT MANAGER, LLC

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2006 JAN -9 A 8:56

FILED

Name	
Availability	
Document Examiner	DCC
Updater	DCC
Underwriter	DCC
Technical Department	DCC

<https://efile.sunbiz.org/scripts/efilcovr.exe>

Corporate Filing Menu

Help

01/06/2006

Jan 06 2006 5:32PM ECFs

(((H06000005057)))

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is: **Tamach Airport Manager, LLC**

**ARTICLE II - Address:**

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

**P.O. Box 653337 Miami, Florida 33265**

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

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

**Carlos Gonzalez  
287 Carabela Court  
Coral Gables, Florida 33143**

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

**ARTICLE IV - Management (Check box if applicable)**

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Member/ Manager: **Carlos Gonzalez P.O. Box 653337 Miami, Florida 33265**  
Member/ Manager: **Manuel Marin -**

  
Signature of a member or an authorized representative of a member

Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

  
Typed or printed name of signer

Filing Fee  
\$144.00 Filing fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 34.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

2006 JAN -9 A 8:56  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA