L06000005906

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
/ ///
// / (
// / `
//
Office Head Only
Office Use Only



100063489231

01/18/06--01068--007 **155.00

SECRETARY GEOGRAPHICAN SECRETARY GEOGRAPHICAN

LAZARUS CORPORATE FILING SERVICE

3320 SW 87 TH AVENUE	
MIAMI, FL 33165 (305) 552-59	973
	Office Use Only
CORPORATION NAME(S) & DOCUME	ENT NUMBER(S), (if known):
1. BRINTO TRADINO	G L.L.C. In B
(Corporation Name)	G L.L.C. (Document #)
(Corporation Name)	(Document #) To 2: 2: 2: 2: 2: 3: 4: To 2: 4: To 2: 4: To 2: To 3: To 3: To 3: To 4: To 3: To 3:
(Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
Walk in Pick up time	
Mail out Will wait	Photocopy
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other

Examiner's Initials

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
BRINIO 12A Oin a L.L.C. (Must end with the words "Limited Liability Company, "Limited Company" of their abbreviation "LLC," or "L.C.,")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
10280 NWS2 Nd TERRACO 10280 NW 52 Nd 10280 DOIN FI 33178 JORAL, FI 33178		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)		
The name and the Florida street address of the registered agent are: Name		
Florida street address (P.O. Box NOT acceptable) 10280 NW 52 Police A CO 53 Police A CO 53 Police A CO 52 Poli		
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		

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	NACIM DOURA 10280 NW 52 TERRACO DOPAL FL 38188
	
· ;	
	tte of filing: (OPTIONAL) pecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
(In accordance with section	on an authorized representative of a member. on 608.408(3), Florida Statutes, the execution test an affirmation under the penalties of perjury tein are true.)
NACIM	DOURA d 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)