# L060000/4367

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
MAIL MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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2006 FEB -9 AM ID: 27
2016 FEB -9 AM ID: 27
2017 AHASSEE, FLORIDA

### EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101 Address

CORAL GABLES, FL 33134 City/State/Zip

(305) 444-4994

Phone #



OFFICE USE ONLY

Examiner's Initials

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

(Corporation Name)	(Document #)
•	(Document #)
(Corporation Name)	(Document #)
(Corporation (48ma)	(Document &)
(Corporation Name)	(Document#)
Walk in Pick up time	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
	i i
NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	
Other	Merger

Foreign

Limited Partnership

Reinstatement

Trademark

Other

Fictitious Name

Name Reservation

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - NAME

AMBER SEE PROPERTY.

The name of the Limited Liability Company is:

Preferred Financial, LLC

#### **ARTICLE II - ADDRESS**

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

255 University Drive Coral Gables, Florida 33134

## ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE.

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

Oscar A. Garcia 255 University Drive Coral Gables, Florida 33134

Having been named as registered agent and to accept service of process for the above stated limited liability Company at the place designated in the 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, Florida Statutes.

Registered Agent's Signature

#### **ARTICLE IV - Management:**

The Limited Liability Company is to be managed by and the name and address of the manager is as follows:

Name:

Address:

D & O Development, Inc.

255 University Drive, Coral Gables, FL 33134

(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.)

Preferred Financial, LLC

By:

D & O Development, Inc. as

Manager

By: Oscar A. Garcia as

Vice President of

D & O Development Inc.

2006 FEB -9 AM 10: 27