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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: DORAL GREEN INVESTM	MENT LLC
	ited Liability Company)
The enclosed Articles of Organization and fee(s) are	e submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
MIRIAM DA SILVA	یے
	(Name of Person)
DORAL GREEN INVESTMEN	NTLIC SEE
	(Firm/Company)
8610 NW 70TH ST.	Eq. 3
0010 NW 7011131.	(Address)
MIAMI EL 22166	(Manages)
MIAMI, FL 33166	City/State and Zip Code)
(C	ity/state and Zip Code)
For further information concerning this matter, plea	se call:
MIRIAM DA SILVA	_{at (} 305 ₎ 593-7897
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	& \$\sumsymbol{\simsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymbol{\sumsymb
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DORAL GREEN INVESTMENT LLC		
(Must end with the words "Limited Liability Company	y, "Limited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
8610 NW 70TH ST.	8610 NW 70TH ST.	
MIAMI, FL 33166	MIAMI, FL 33166	
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of MIRIAM DA SILVA	RIL	
	Name SEY OF COATE treet address (P.O. Box NOT acceptable) SEY OF COATE OF	1 1
8610 NW 70TH ST.		•
Florida si	treet address (P.O. Box NOT acceptable)	
MIAMI,	FL 33166	
City	, State, and Zip	
liability company at the place designa registered agent and agree to act in this c	and to accept service of process for the above stated limit tted in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of plete performance of my duties, and I am familiar with an	rali

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR MIRIAM DA SILVA 8610 NW 70TH ST MIAMI, FL 33166 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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.) MIRIAM DA SILVA Typed or printed name of signee

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)