Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

southwest realty group llc

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Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name;				
The name of the Limited Liability Company	v is:			
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•				
SOUTHWEST REALTY GROUP LLC.	i		•	
(Must end with the words "Limited Liability Company, "L	Limited C	ompany" or their abbreviation "LLC," or "L.C.,	")	
	1			
ARTICLE II - Address:	. !			
The mailing address and street address of th	ie prinç	ipal office of the Limited Liability (Compa	ny is:
•	į			
Principal Office Address:	Ĭ,	Aniling Address:		
	į			
11117 WEST OKEECHOBEE ROAD SUITE 108	<u> </u>	1117 WEST OKEECHOBEE ROAD SUITE	108	
HIALEAH GARDEN FL 33018	Ħ	IIALEAH GARDEN FL 33018		
	<u> </u>		₹ ∽	30
	1		EB	TOF 90
ARTICLE III - Registered Agent, Registe				
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	tegistered	Agent. You must designate an individual or an		25
ousiless citity with an active rigities registrations,	į		Ä₹	•
The name and the Florida street address of t	he regi	stered agent are:		A
, <u>.</u>	7		ဝ် အ	9
JULIO ROSALES			≝ ≅	9:42
Ne .	ame	:	> ···	N
11117 WEST OKEECH		POAD SUITE 108	,	
		, , , , , , , , , , , , , , , , , , ,		
Florida stree	T accress	s (P.O. Box <u>NOT</u> acceptable)		
HIALEAH GARDEN FL 331	D18 🛊	<u>ፒ</u>		
City, Str	ate, and	Zip		
**		and the contract of the characters of		

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 (REQUIRED)

(CONTINUED)
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H06000188407

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Title:	Name and Address:		
"MGR" = Manager			
"MGRM" = Managing Member			
MGRM	LUIS RIERA		
	11117 WEST OKEECHOBEE ROAD SUITE 108	_	
	HIALEAH GARDEN FL 33018	-	
		_	•
		- 06	
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of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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