

**L06000079028**

Florida Department of State  
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RECEIVED 06 AUG 10 AM 10:42 DIVISION OF CORPORATIONS	<b>To:</b> Division of Corporations Fax Number : (850) 205-0383	SECRETARY OF STATE TALLAHASSEE, FLORIDA 06 AUG 10 AM 8:22 FILED
	<b>From:</b> Account Name : EMPIRE CORPORATE KIT COMPANY Account Number : 072450003255 Phone : (305) 634-3694 Fax Number : (305) 633-9696	

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

carlos rodriguez, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

CARLOS RODRIGUEZ, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or 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:

920 S.W. 67th Avenue  
Miami, Florida 33144

#### Mailing Address:

920 S.W. 67th Avenue  
Miami, Florida 33144

### 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:

Carlos R. Rodriguez

Name

920 S.W. 67th Avenue

Florida street address (P.O. Box **NOT** acceptable)

Miami FL 33144

City, State, and Zip

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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.

Carlos Rodriguez  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**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:**MGRMCarlos R. Rodriguez920 S.W. 67th AvenueMiami, Florida 33144

(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.)

✓ CARLOS R. RODRIGUEZ  
 Typed or printed name of signee

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**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)

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