

LD6000085174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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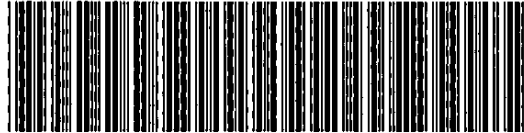
(Business Entity Name)

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8/28/06

08/25/06

Rolando Leiva

Requestor's Name

7400 SW 50 Terr #302

Address

Miami FL 33155

City

State

ZIP

Phone

(305) 663-1511

CORPORATION(S) NAME

Celebration Executive Suites, LLC

( ) Profit

( ) NonProfit

( ) Amendment

( ) Merger

( ) Foreign

( ) Dissolution

( ) Mark

( ) Limited Partnership

( ) Annual Report

( ) Reinstatement

( ) Reservation

☒ Other LLC

( ) Change of Registered Agent

( ) Certified Copy

( ) Photo Copies

( ) Certificate Under Seal

( ) Call When Ready

( ) Call If Problem

( ) After 4:30

☒ Walk In

( ) Will Wait

☒ Pick Up

( ) Mail Out

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier



Empire Toll Free: 1-800-432-3028

ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY

Date: August 8, 2006

ARTICLE I – NAME:

The name of the Limited Liability Company is:

**CELEBRATION EXECUTIVE SUITES, LLC**

ARTICLE II – ADDRESS:

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

500 SOUTH DIXIE HIGHWAY, SUITE #301  
CORAL GABLES, FL 33146

ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, &  
REGISTERED AGENT'S SIGNATURE:

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

VENANCIO TORRE  
Name

4320 SANTA MARIA STREET  
Florida Street Address

CORAL GABLES, FL 33146  
City, State, and Zip

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TALLAHASSEE, FLORIDA  
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8/28/06

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.

x   
\_\_\_\_\_  
Registered Agent's Signature

#### **ARTICLE IV – MANAGEMENT**

The Limited Liability Company is to be considered a multiple manager LLC and is therefore a SINGLE MANAGER LLC company.  
The name and address of each initial MANAGER or MANAGER MEMBER is as follows:

**Title:**  
Manager/Member

**Name and Address:**  
TORRE HOLDINGS, LLC  
4320 Santa Maria Street  
Coral Gables, FL 33146

-continued-

## ARTICLE V – EFFECTIVE DATE


The effective date of the Limited Liability Company shall be: August 28, 2006.

X 

\_\_\_\_\_  
Signature of 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

TORRE HOLDINGS, LLC

X 

\_\_\_\_\_  
VENANCIO TORRE  
Manager of LLC

August 8, 2006