

L06000098773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

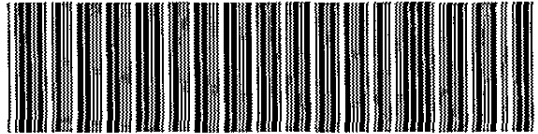
(Business Entity Name)

(Document Number)

Certified Copies _____ = Certificates of Status _____

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Office Use Only



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10/10/06--01016--005 **155.00

FILED
06 OCT 10 PM 1:17
TALLAHASSEE, FLORIDA
RECEIVED
2006 OCT 10 AM 11:07
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TO ADOPT RESOLUTION
SUFFICIENCY OF FILING

**LAZARUS
CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

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

1. PRINCE AMIR INVESTMENT, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time

2.00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

☐ Profit

☐ Not for Profit

☒ Limited Liability

☐ Domestication

☐ Other

AMENDMENTS

☐ Amendment

☐ Resignation of R.A., Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

Examiner's Initials

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PRINCE AMIR INVESTMENT, 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 Company is:

Principal Office Address:

23703 SW 107 CT.
HOMESTEAD, FL. 33032

Mailing Address:

23703 SW 107 CT.
HOMESTEAD, FL. 33032

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:

LUIS RUIZ

Name

23703 SW 107 CT.

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

HOMESTEAD, FL. 33032

City, State, and Zip

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 appointments 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 - PAGE 1 of 2)

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TALLAHASSEE, FLORIDA

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:

MGR

LUIS RUIZ

23703 SW 107 CT.


HOMESTEAD, FL. 33032

(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 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 and affirmation under the penalties of perjury that the facts stated herein are true.)

LUIS RUIZ

Typed or printed name of signee

Filing fee:

**\$125.00 Filing Fee for Articles of Organization
and designation of Registered Agent**

\$30.00 Certified copy (Optional)

\$5.00 Certified of Status (Optional)