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(Re	equestor's Name)	
(Ac	ddress)	<u> </u>
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
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Certified Copies	_ Ceptificates	s of Status
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DEFARTMENT OF STATE DIVISION OF CORPORATIONS TALLANASSEE, FLORIDA

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SECRETARY OF SIAT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nar			12 SE SE -17
The name of the Li	imited Liability Company is:		AR 2
2040 Opa Locka	a Plaza, LLC		Ser I
(Must end with the words	s "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC,	"or "L.C.")
ARTICLE II - Ad	ldress:		() () () () () () () () () ()
		incipal office of the Limited Li	ability Company 15
			77
Principal Office A	<u>lddress:</u>	Mailing Address:	
16445 Collins Aven	ue	16445 Collins Avenue	
#724		#724	
Miami Beach, Flori	ida 33160	Miami Beach, Florida 33160	
(The Limited Liability Co		Office, & Registered Agent's ered Agent. You must designate an indiv	
The name and the I	Florida street address of the re	egistered agent are:	
	Richard C. Wolfe, Esq.		
	Name		
	100 S.E. Second Street	· · · · · · · · · · · · · · · · · · ·	
	Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	
	Miami	FL 33131	
	City, State, a	nd 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 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) Page 1 of 2

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

3053817116

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Mem	ıber
MGRM	Behar Family Limited Partnership
	16445 Collins Avenue, #724
	Miami Beach, Florida 33160
MGR	Moises Behar
11101	16445 Collins Avenue, #724
	Miami Beach, Florida 33160
MGR	Mercedes Behar
	16645 Collins Avenue, #724
	Miami Beach, Florida 33160
effective date is listed, the date 0 days after the date of filing	er than the date of filing: (OPTIONAL te must be specific and cannot be more than five business days
A contraction of the Attended	•)
REQUIRED SIGNATURI	
REQUIRED SIGNATURI	
REQUIRED SIGNATURI	E:
REQUIRED SIGNATURI Signature (In accordate of this document of the factor of the facto	E: of a member or an authorized representative of a member. nce with section 608,408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury
REQUIRED SIGNATURI Signature (In accordate of this document of the factor of the facto	E: Ma member or an authorized representative of a member. Ince with section 608.408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury acts stated herein are true.) C. Wolfe, Esq.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)