# LD7000035754

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Fiting Officer:



04/04/07--01023--007 \*\*155.00

DT APR -1, FIL 2: 17

**FILED** 07 APR -4 PH 3:55 SECRETARY OF STATE TALLAHASSEE, FLORID

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LAZARUS CORPORATE FILING SERVICE	• •
3320 SW 87TH AVENUE	70 9 1
MIAMI, FL 33165 (305) 552-5973	
CORPORATION NAME(S) & DOCUMENT NU 1. <u>NEXT INVESTMENT LL</u> (Corporation Name)	ORDER 5
2(Corporation Name) 3.	(Document #)
(Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
Walk in Pick up time <u>J.06</u> Mail out Will wait Pho	tocopy Certificate of Status
NEW FILINGS AMEN	NDMENTS.
Not for Profit     Ref       Limited Liability     Ch       Domestication     Di	mendment esignation of R.A., Officer/Director hange of Registered Agent issolution/Withdrawal lerger
OTHER FILINGS REGIS	STRATION/QUALIFICATION
Fictitious Name     Li     Re     Tr	breign imited Partnership einstatement rademark ther
	Examiner's Initials

CR2E031(7/97)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE 1 - Name:**

The name of the Limited Liability Company is:

LLC. INVESTMENT ds "Limited Liebility Company, ") "Limited Company"

### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Compared

**Principal Office Address:** W 84 AVENUE #20

### **Mailing Address:**

900 SW 84	AVENUE	#207	
Mjami	72144		

or their abbreviation "LLC," or "L.C.,

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Linbility 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:

AUTO Name SW 84 AVENUE #207 Florida street address (P.O. Box NOT acceptable) Ghi FL 33144 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 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

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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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MER	DAVID A. Armas 900 SW 84 Avenue #2071 Miami - FC- 33144
MGR	Jose-Ricardo J. Armas 14720 SW 55 terrace Miami - AC. 33185
<u></u>	
······································	
(Use attachment if necessary)	
CLE V: Effective date, if other than the c effective date is listed, the date must be 0 days after the date of filing.)	date of filing: (OPTIONAL) specific and cannot be more than five business days prior

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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.)	, 
DAVID A. ArmAS Typed or printed name of signee	-
Filing Frees;	. ••
<ul> <li>\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent</li> <li>\$ 30.00 Certified Copy (Optional)</li> <li>\$ 5.00 Certificate of Status (Optional)</li> </ul>	

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