L070000 44402

(Re	questor's Name)	
(Ad	dress)	
. (Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
		4,29
	Office Use Only	/ III



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COVER LETTER

то:	Registration Sec Division of Corp					
SUBJ	ECT: COSA F	OLDINGS LLC			**************************************	_
		(Name of Limited	d Liability Cor	npany)		
The e	nclosed Articles of	Organization and fee(s) are so	ubmitted for fi	ling.		
Please	return all correspo	endence concerning this matte	r to the follow	ing:		
	Jason Saun	ders				
		(1	Name of Person)		
	COSA HOL	DINGS LLC				APR SECR
		(Firm/Company)			필 3
	325 South	Biscayne Blvd Sui				OT APR 25 PH 12: US SECRETARY OF STATE FALLALISSEE. FLORIC
			(Address)			100 P
	Miami, FL	33131				BA C
		(City.	/State and Zip C	ode)		
For fu	rther information c	oncerning this matter, please	call:			
Jaso	on Saunders		at (281	620 5004	ļ	
	(Name o	of Person)		Code & Daytime Te	lephone Number)	_
Enclo	sed is a check for	the following amount:				
\$12	5.00.Filing Fee	.\$130.00 Filing Fee & Certificate of Status	Certified C		\$160.00 Filin Certificate of Sta Certified Copy (additional copy is of	atus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisi Clifto	/Courier Address ration Section on of Corporation n Building Executive Center	s ns	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
COSA HOLDINGS LLC	
(Must end with the words "Limited Liability Company, "Limited	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
325 South Biscayne Blvd Suite 1723	325 South Biscayne Blvd Suite 1723
Miami, FL 33131	Miami, FL 33131
	15 Si
• • • • • • • • • • • • • • • • • • •	Office, & Registered Agent's Signature: 2
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Regist	tered Agent. You must designate an individual or another
business entity with an active Florida registration.)	m _Q Pr
The name and the Florida street address of the r	egistered agent are: PH 12: 08 PH 12: 08
	THE O
Jason Saunders	DE 8
Name	
00E0 (LB) =:	
325 South Biscayne Blv	d Suite 1723

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..

City, State, and Zip

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

FL 33131

Registered Agent's Signature (REQUIRED)

Miami

(CONTINUED)
Page 1 of 2

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

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

MGRM	Jason Saunders
	325 South Biscayne Blvd Suite 1723
	Miami, FL 33131
MGRM	Luis Cota
	325 South Biscayne Blvd Suite 1723
	Miami, FL 33131
	SECRETAR TALLAHASS
(Use attachment if necessary)	

REQUIRED SIGNATURE:

Signature of a member of 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.)

C) MOON Typed or printed name of signee

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)