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VALIDATION

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Gabriel Detaden CAN

Requestor Name SW 144 NVC.

Address Of Sum Region Company Region SW 144 NVC.

Address Of State 21P Phone

OT APR 27 PH 3: 38
SECRETARY OF STATES
SECRETARY OF STATES

CORPORATION(S) NAME

LORDSNI	D Invest	ment, LLC
		7
	-	
() Profit () NonProfit () Amendment	() Merger
() Foreign () Dissolution	() Mark
() Limited Partnership (() Reinstatement () Annual Report) Reservation	() Change of Registered Agent
Cartilled Copy () Photo Copies	() Certificate Under Seal
() Call When Ready () Call If Problem	() After 4:30
Name Availability Document		

Enpire Toll Free: 1-800-432-3028

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Name	
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Updater	
Verifier	
Acknowledgment	
W.P. Verifier	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	OT ARR 2:
LORDSHIP TWVESTM. (Must end with the words "Limited Liability Company, "Limit	TENT LLC
ARTICLE II - Address:	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12807 SW 133 STREET MIAMI, FL 33186	12807 SW 133 STREET MIAMI, FC 33186

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:

CONCEPCION GONZALEZ

Name

12807 SW 133 STREET

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

MIAMI FGL 33/86

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	DIANA GOMEZ 12807 SW 133 STREET
Member	CONCEBLION GONTALE
	MIAMI, FC 33186
Use attachment if necessary)	
EV: Effective date, if other than ective date is listed, the date mu	the date of filing: (OPTION st be specific and cannot be more than five business dates
EV: Effective date, if other than	the date of filing: (OPTION st be specific and cannot be more than five business da
LE V: Effective date, if other than ective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE:	the date of filing: (OPTION st be specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date the specific and cannot be more than five business date the specific and cannot be more than five business date the specific and cannot be more than five business date the specific and cannot be more than five business date the specific and cannot be more than the spe

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)