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(Requestor's Name)
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## **LAZARUS** CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

Examiner's Initials

MIAMI, FL 33165 (305) 552-5973	
	Office Use Only
CORPORATION NAME(S) & DOCUMENT	T NUMBER(S), (if known):
. CGO INVESTMENT, 2	11C
(Corporation Name)	(Document #)
	Photocopy  Certified Copy  Certificate of Status  MENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS  Annual Report Fictitious Name	EGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
ARTICLE I - Name: The name of the Limited Liability Company is:  CGO Tavestment 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 Liability Company is
Principal Office Address: Mailing Address:
14630 SW 50 St Miami, FL 33175 Miami, FL 33175
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Limbility 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:
CARLOS GARCIA
Name
14630 SW 50 ST Florida street address (P.O. Box <u>NO'T</u> acceptable)
Florida street address (P.O. Box NOT acceptable)
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.
Carlos Janen
Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) · (OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business 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 an affirmation under the penalties of perjury that the facts stated herein are true.) Typed or printed name of signee Filing Fees:

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

Dona 2 of

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)