

LO7000076543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

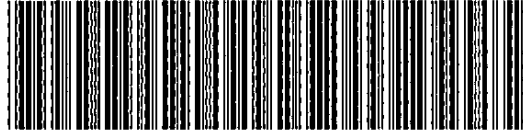
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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BK

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07/25/07--01007--024 \*\*155.00

RECEIVED  
07 JUL 25 AM 11:34  
DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 JUL 25 PM 1:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# LAZARUS

## CORPORATE FILING SERVICE

Requester's Name

3320 S.W. 87<sup>TH</sup> AVENUE

Address

MIAMI, FL 33165 (305) 552-5973

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. SUMBRE ENTERPRISES L.L.C.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time

2:05

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

### NEW FILINGS

- ☐ Profit
- ☒ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ Other

### OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

### AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

### REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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SECRETARY OF STATE

**Sumbre Enterprises, L.L.C.  
Articles of Organization**

**BY THESE ARTICLES**, the undersigned desiring to form a limited liability company under and pursuant to the Florida Limited Liability Company Act, Chapter 608, Florida Statutes does hereby adopt the following Articles of Organization:

**1. NAME.** The name of this Liability Company is Sumbre Enterprises, L.L.C.

**2. PRINCIPAL AND MAILING ADDRESS.** The Principal and Mailing address of this Limited Liability Company is: 275 NE 18 Street #1603, Miami, FL

**3. TERM.** The period of duration for the Limited Liability Company shall commence on the date these Articles of Organization are filed by the Secretary of State and shall continue perpetually unless terminated: (1) in accordance with regulations of the Limited Liability Company, (2) by the unanimous written agreement by all members, (3) by the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member, or (4) upon the occurrence of any other event which terminates the continued membership of a Member. However upon any such terminated event, the existence and business of the Limited Liability Company may be continued with the consent of the majority of the remaining Articles of Organization providing for the existence of the Company.

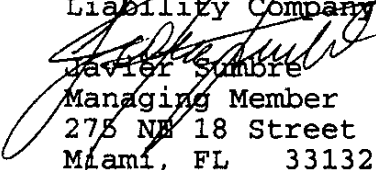
**4. PURPOSE.** The purpose for which the Limited Liability Company is being formed is to engage in any activity or business permitted under the laws of the United States of American and the State of Florida.

**5. MANAGEMENT.** The Limited Liability Company shall be conducted, and managed by no fewer than one (1) Manager who shall be elected annually by the Members of the Limited Liability Company in the manner prescribed by and provided in the Regulations of the Limited Liability Company. The name and address for the initial Manager is:

Javier Sumbre at 275 NE 18 Street #1603, Miami, FL 33132 .

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6. **MEMBERS.** Name and addresses for the Members in this Limited Liability Company are:

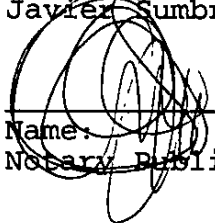
  
Javier Sumbre  
Managing Member  
275 NE 18 Street #1603  
Miami, FL 33132

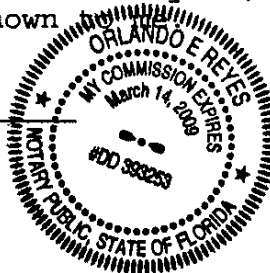
7. **ADMISSION OF ADDITIONAL MEMBERS:** Additional members may be admitted upon the approval of a majority of the Members of the Limited Liability Company upon with written application of such New Member in the manner set forth in the Regulations of the Limited Liability Company.

8. **REGISTERED AGENT.** The initial registered agent for this Limited Liability Company is Javier Sumbre and the initial registered office is located at 275 NE 18 Street #1603, Miami, FL 33132.

STATE OF FLORIDA  
COUNTY OF MIAMI DADE

The foregoing was acknowledged before me July 20, 2007 by  
Javier Sumbre who is personally known to me

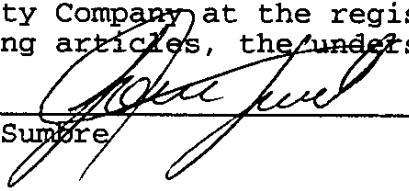
  
Name: \_\_\_\_\_  
Notary Public, State of Florida



My Commission Expires:

**CONSENT OF REGISTERED AGENT**

HAVING BEEN NAMED as a registered agent for this Limited Liability Company at the registered office designated in the foregoing articles, the undersigned accepts the designation.

  
Javier Sumbre