

L07000107460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

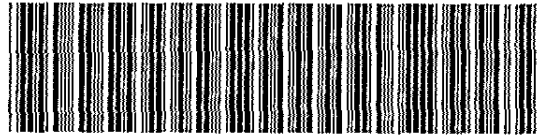
(Document Number)

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Certificates of Status \_\_\_\_\_

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RECEIVED  
07 OCT 23 PM 3:43  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 OCT 23 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

FILED  
07 OCT 23 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. GOOD ISLAND INVESTMENTS, LLC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2.00 ☒ 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

**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**FILED**  
07 OCT 23 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I Name :**

*The Name of the Limited Liability Company is :*

**GOOD ISLAND INVESTMENTS, LLC.**

**ARTICLE II - Address :**

*The mailing address and street address of the principal office of the  
Limited Liability Company is :*

**701 SW 27<sup>th</sup> AVENUE Suite 606  
MIAMI , Florida 33135**

**ARTICLE III - Registered Agent , Registered Office , & Registered  
Agent's Signature :**

*The name and the Florida Street Address of the registered agent are :*

**Martha J. Benito**

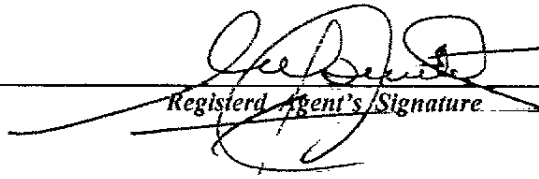
\_\_\_\_\_  
*Name*

\_\_\_\_\_  
**8310 NW 10<sup>th</sup> Street # J - 9**  
**Address Not Acceptable P.O.Box**

\_\_\_\_\_  
**MIAMI , Florida 33126**  
**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. .

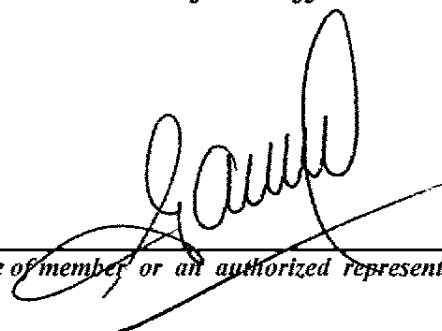
  
Registered Agent's Signature

**ARTICLE IV - Management ( Check box if applicable . )**

   The Limited Liability Company is to be managed by one manager or more managers and is ,  
Therefore , a manager - managed company .

Member - Manager - Gonzalo Machado  
Member - Manager - Javier Gonzalez

( An additional article must be added if an effective date is  
requested )

  
Signature of 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 .

GONZALO MACHADO

\_\_\_\_\_  
Typed or printed name of signee