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4 900	(Requestor's Name) (Address)		300112608143
	(City/State/Zip/Phone #) PICK-UP WAIT MAIL		12/06/0701028013 **125.00
	(Business Entity Name) (Document Number) Certified Copies Certificates of Status		Ā.s. C
,	Special Instructions to Filing Officer:	-	O7 DEC -6 AM 11:30 SECRETARY OF STATE ALLAHASSEE, FLORIDA

Office Use Only

EFFECTIVE DATE 12/05/07

12/10

COVER LETTER

TO:	Registration Section Division of Corporations	rib				
SUBJI	ECT: Shangri-La M (Name of Limit	ited Liability Company)				
The en	nclosed Articles of Organization and fee(s) are	submitted for filing.				
Please	return all correspondence concerning this mat	tter to the following:				
	Juan Carlos	Padial				
		(Name of Person)	_			
			_			
	(Firm/Company)					
	15913 Fisher	- Island Drive	<u></u>			
	Miami, FL	- Island Drive (Address) 33109 FEE	07/			
	(Ci	ity/State and Zip Code)	7 T			
For fur	rther information concerning this matter, pleas	se call:				
	TC Padial (Name of Person)	at (305) 8/5-82 FORD 3	5			
	(Name of Person)	(Area Code & Daytime Telephone Number				
Enclos	sed is a check for the following amount:					
☑ \$125	5.00 Filing Fee \$\times \text{ \$130.00 Filing Fee & Certificate of Status}	Certified Copy (additional copy is enclosed) \$155.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Principal Office Address:	Mailing Address:			
15913 Fisher Island Driv Miami, FL 33109	ve + Same Ass 07			
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 markother business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Tuan Carlos Padial Name				
Miani City, Si	FL 33109 tate, and Zip			
Miami City, St Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap	tate, and Zip d to accept service of process for the above stated limit in this certificate, I hereby accept the appointment as pacify. I further agree to comply with the provisions of the performance of my duties, and I am familiar with an entitient agree to comply with the provisions of the performance of my duties, and I am familiar with an entitient with an entitle with an e			

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM"⊨ Managing Member	
MG-RM	Juan Carlos Padial 15913 Fisher Island Drive Miami, FL 33109
	07 DEC -6 SECRETAR ALLAHASS
	FLORIDA
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: Dec. 5, 2007. (OPTIONAL) (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.)

Carlos Padial
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)