

LD 8000044545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

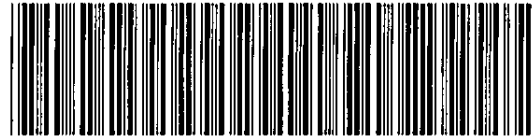
(Business Entity Name)

(Document Number)

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05/06/08--01002--002 **125.00

RECEIVED
08 MAY -5 PM 2:47
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 MAY -5 PM 4:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

MAY 5 2008

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: ASHLEY SMITH

DATE: 05-05-2008

REF. #: 001133.86425

CORP. NAME: MIAMI APARTMENT FINDERS, LLC

FILED
08 MAY -5 PM 4:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 525960 **FOR \$** 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
MIAMI APARTMENT FINDERS, LLC**

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of Company shall be: **MIAMI APARTMENT FINDERS, LLC**

ARTICLE II- PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The initial principal office and mailing address of the Company shall be:

1602 Alton Road, #610
Miami Beach, FL 33139

**ARTICLE III - INITIAL REGISTERED AGENT AND INITIAL REGISTERED
OFFICE**

The Company's initial registered agent and registered office in the State of
Florida shall be:

Jonathan Lee
1602 Alton Road, #610
Miami Beach, FL 33139

ARTICLE IV - EXECUTION OF ARTICLES OF ORGANIZATION

The name and post office address of the person duly authorized to execute these Articles
of Organization is as follows:

Jonathan Lee
1602 Alton Road, #610
Miami Beach, FL 33139

ARTICLE V – EFFECTIVE DATE

The effective date of these Articles of Organization shall be May 5, 2008.

The undersigned, for the purpose of forming a limited liability company to do business within the State of Florida, does make and file these Articles of Organization, hereby declaring and certifying that he is the authorized representative of Company and certifying that the facts stated above are true.

A handwritten signature in black ink, consisting of a large, stylized 'J' followed by a horizontal line extending to the right.

Jonathan Lee

ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE FOREGOING LIMITED LIABILITY CORPORATION, AT THE PLACE DESIGNATED IN THESE ARTICLES OF ORGANIZATION THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF HIS DUTIES.

DATED THIS 5TH DAY OF MAY, 2008.

A handwritten signature in black ink, appearing to be 'Jonathan Lee', written over a horizontal line.

Jonathan Lee