# 10800049085

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OR MAY 15 PM 2: L3
SEGNETARY OF STATE,
TALLAHASSEE, FLORION

D. BRUCE

MAY 16 2008

**EXAMINER** 

## **FERNANDO GUZMAN**

### 19820 W. SAINT ANDREWS DRIVE

**MIAMI, FL 33015** 

(786) 251-8812 (DAYTIME PHONE NUMBER)

O8 HAY IS PH 2: L3

SECRETANY OF STATE

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

ARTICLE I - Name: The name of the Limited Liability Company	is:			
SOLID GEMS, LLC  (Must end with the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")		-	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Lial	bility C	Compa	any is:
Principal Office Address:	Mailing Address:			
19820 W. SAINT ANDREWS DRIVE MIAMI, FL 33015	19820 W. SAINT ANDREWS DRIVE MIAMI, FL 33015		<u> </u>	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)  The name and the Florida street address of the  FERNANDO GUZIN	e registered agent are:			The second secon
19820 W. SAINT A	NDREWS DRIVE	ř.	P	
	address (P.O. Box <u>NOT</u> acceptable)	STA STA	2: 1.3	O
MIAMI City, State	FL 33015 e, and Zip	AGE A	చ్	
Having been named as registered agent and to liability company at the place designated it registered agent and agree to act in this capact statutes relating to the proper and complete accept the obligations of my position as re	to accept service of process for the a n this certificate, I hereby accept the city. I further agree to comply with t performapce of my duties, and I am	appoir he prov familia	ntmen vision ar with	t as s of all h and

EFFECTIVE DATE 5-15-08

(CONTINUED) Page 1 of 2

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" = Mana "MGRM" = Ma		Name and Address:			
MGRM		FERNANDO GUZMAN			
<u></u>	19820 W. SAINT ANDREWS DRIVE				
		MIAMI, FL 33015			
MGR		ADRIANA BOLIVAR			
	· ·	19820 W. SAINT ANDREWS DRIVE			
		MIAMI, FL 33015			
**************************************					
	<del></del>				
(Use attachment ARTICLE V: Effective (If an effective date is list to or 90 days after the d	date, if other than the da	te of filing: 5/15/08 . (pecific and cannot be more than five bu	(OPTIO usiness (		
<u>REQUIRED</u> SI	GNATURE:		SECH TALLA	H 80	***************************************
	Signature of a member of	r an authorized representative of a member.		HAY	
	(In accordance with section	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury	ARY OF S	15 PH	
	FERNANDO GI	JZMAN	OR OR	2:1	
		or printed name of signee	IF. AOA	ယ်	

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)