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(((H08000195314 3)))



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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973

Fax Number : (305)220-1440

LORIDA/FOREIGN LIMITED LIABILITY CO.

ARAGON INVESTMENT PROPERTIES, LLC.

Certificate of Status	0
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EXAMINER

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FAX NO. :3052201440

Aug. 14 2008 04:46PM P2

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARAGON INVESTM	ENT PROPERTIES, LLC.		
	1. iability Company, "I. L. C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
9726 NW 52 STREET,# 504,DORAL,FL,33178	9725 NW 52 STREET,# 504,DORAL,FL,33178		
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	Registered Agent, You must designate an individual in adulter.		
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JOSE VIC	Registered Agent, You must designate an individual in another the registered agent are: ENTE RIOS Vame		
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JOSE VIC	Registered Agent, You must designate an individual in another the registered agent are: ENTE RIOS Vame		
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of JOSE VICE 19725 NW 52	Registered Agent, You must designate an individual in another the registered agent are: ENTE RIOS Vame		
(The Limited Liability Company cannot sorve as its own business ontity with an active Florida registration.) The name and the Florida street address of JOSE VIC 19725 NW 52 Florida street.	The registered agent are: ENTE RIOS STREET, # 504		

Rogistered Agent's Signature (REQUIRED)

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.

(CONTINUED)
Page 1 of 2

EFFECTIVE DATE 8/14/08

PH 3:51

H08000195314

Name and Address:

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

<u>Title:</u>
"MGR" = Manager

"MGRM" = Managing Member

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

MGR	JOS	SE VICENTE RIOS	
 	972	5 NW 52 STREET,#504.DORAL,FL,33178	- Sindulation
			
			
-			

(Use attachment	if necessary)		
A TEMPERATUR BY M.Z. FLOC		si 08-14-08 (or	ALIVATA I
ARTICLE V: Effective data is list	iate, if other than the date of t	filing: 08-14-08 . (OP c and cannot be more than five busin	ices dave prior
to or 90 days after the da		Cand Cannot to more than her busin	ma duja pi ka
25 th 14 44y / 2101 his ta			
REQUIRED SIG	₹NATURE:		
	1		
			TAL
	Signature of a member or an a	thorized representative of a member.	
	(In accordance with section 608.	408(3), Florida Statutes, the execution	LAHI CREI
	of this document constitutes an a that the facts stated herein are	offirmation under the penaltics of perjury	ASSI ASSI
	JOSE V	ICENTE RIOS	1, 1 a 11 h
	Typed or pri	inted name of signee	· Fr
¥2812 ¥7			STATE
Filing Fees	•	4	<u> </u>
\$125.00 Filing 1			- ۱۰٫۰۱

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