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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

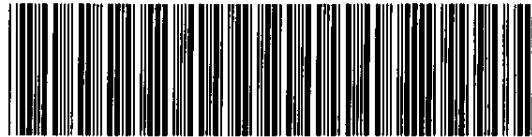
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/22/08--01019--025 **160.00

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08 OCT -1 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

OCT - 2 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 24, 2008

MARK-A. STEPHAN
BUENA VISTA HOLDINGS, LLC
101 N.E. 43RD STREET
MIAMI, FL 33137

SUBJECT: BUENA VISTA HOLDINGS, LLC
Ref. Number: W08000044327

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for BUENA VISTA HOLDINGS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$160.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 108A00051384

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RUTILUS
BUENA VISTA HOLDINGS, LLC
(Name of Limited Liability Company)

FILED
08 OCT -1 AM 9:15
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK-A. STEPHAN

RUTILUS
(Name of Person)

BUENA VISTA HOLDINGS, LLC

(Firm/Company)

101 NE.43 ST

(Address)

MIAMI, FL 33137

(City/State and Zip Code)

For further information concerning this matter, please call:

MARK-A. STEPHAN

(Name of Person)

at (305) 573-8478

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 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:

RUTILUS
~~BUENA VISTA~~ HOLDINGS, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

101 NE 43 ST
MIAMI, FL 33137

Mailing Address:

SAME

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 or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

MARK-A. STEPHAN

Name

101 NE 43 ST

Florida street address (P.O. Box **NOT** acceptable)

MIAMI, FL 33137

FL

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

MARK-A. STEPHAN

101 NE 43 ST

MIAMI, FL 33137

MGRM

STEPHEN MALTAGLIATI

4560 N JEFFERSON AVE

MIAMI BEACH, FL 33140

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

MARK-A. STEPHAN

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)