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B. KOHR

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EXAMINER

09 FEB 27 PM 1: 15 Secretary of State

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

OOR STATE OF THE OWNER OWNER OF THE OWNER OWNE

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2.06 Walk in Certified Copy Photocopy Mail out Will wait Certificate of Status **NEW FILINGS** <u>AMENDMENTS</u> Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

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ARTICLE I - Name: The name of the Limited Liability Company is:	
Roger's Olympic Center & (Must end with the words "Limited Liability	Velodrome LLC ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1425 SW 784N AVR MIOMI FL 33144	- same
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the r	egistered agent are:
Yilianet He	(nandlz
Name	
	ress (P.O. Box NOT acceptable)
	, FL ろ3) 시니 nd Zip
City, State, a	nd Zip
liability company at the place designated in t registered agent and agree to act in this capacit	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and

fall accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

's Signature (REQUIRED)

(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" = Manager "MGRM" = Managing Member	Name and Address:
M6RM	YITICINET HEMANDLE 1475 SW 78th AVE MIAMI, FL 33144
(Use attachment if necessary)	
LE V: Effective date, if other tha fective date is listed, the date m	on the date of filing: (OPTION ust be specific and cannot be more than five business d
LE V: Effective date, if other thate the date is listed, the date middless after the date of filing.)	an the date of filing: (OPTION ust be specific and cannot be more than five business d
LE V: Effective date, if other that fective date is listed, the date modays after the date of filing.) REQUIRED SIGNATURE:	ust be specific and cannot be more than five business d
Rective date is listed, the date middays after the date of filing.) REQUIRED SIGNATURE: Signature of a midding and signature of	ust be specific and cannot be more than five business d
LE V: Effective date, if other that fective date is listed, the date me days after the date of filing.) REQUIRED SIGNATURE: Signature of a me (In accordance we of this document)	ust be specific and cannot be more than five business d

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)