109000061225

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		_
, (Cit	y/State/Zip/Phon	e #)	_
PICK-UP	WAIT	MAIL.	
· (Bu	siness Entity Nar	ne)	-
(Do	cument Number)		·
Certified Copies <u></u>	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		

Office Use Only



500157408195

06/23/09--01062--008 **130.00

2009 JUN 23 AM II: 13
SECRETARY OF STATE
ALL AHASSEE, FLORIDA

T. CLINE

JUN 24 2009

EXAMINER

COVER LETTER

10.	Division of C						
SUBJE	CT:	Real I	Miami Manage	ement			
50502	<u>.</u>	Name of Limit	ed Liability Compan	у			
The end	closed Articles	of Organization and fee(s) are	submitted for filing.				
Please	return all corres	pondence concerning this mat	ter to the following:				
-			Annie Nahon			·	
			Name of Person				
		The Real	Properties Grou	p, LLC		·····	- , ,
			Firm/Company				
		111 NE	1st Street, 3rd F	loor			
•	•		Address			TAL 3S	1009 JUN
		M	iami FL 33132			CRE	یے
•		Cit	ty/State and Zip Code			ASA	23
_			e@realannie.co		·· ·· ·· · · · · · · · · · · · · · ·	E X	
		E-mail address: (to be used	•	nouncation)		FS	5
For furt	ther information	concerning this matter, please	e call: ov 305	30	10-3191	ORIO	-
		el Sorensen	_at (786)		220-6937		
	Name	e of Person	Area Code &	ι Daytime Tele	ephone Number		
Enclos	ed is a check t	for the following amount:					
\$125 .6	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Copy (additional copy i	, –	\$160.00 Filir Certificate o Certified Co (additional cop	f Status py	&
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bui	f Corporation ilding utive Center (s		

ARTICLESOF	PRGANIZATION	FOR FLORIDA LIMITED	LIABILITY COMPAN	(Y
ARTICLE I - Nat The name of the Li	ne: mited Liability Con	npany is:		
(Mr	Real Miami	Management, LLC.	านตา	
ARTICLE II - Ad	dressz	of the principal office of the l		y is:
Principal Office A	ddress:	Malling Address:		
		Annie Nahon 7900 Harbor Islan North Bay Village	FL 33141 圣司	2009 JUN 23
ARTICLE III - Re (The Limited Liability Co business entity with an a	egistered Agent, Rompany cannot serve as its active Florida registration.	egistered Office, & Registere com Registered Agent. You must design	ed Agent's Signatures an individual or enother	
The name and the l	Florida street addres	s of the registered agent are:	LORIDA	AK 11: 13
	Mende	z Brown Law Group Name	_ Dr	်ယ
		th Biscayne, Ste 2800		
	Mian			
	Cit	ty, 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

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:
MGRM	Annie Nahon 7900 Harbor Island Drive, # 1423 North Bay Village, FL 33141
	SECRE IN ALL AHA
(Use attachment if necessary)	JUN 23 A RETARY O AHASSEE
CLE V: Effective date, if other than the date effective date is listed, the date must be spoon days after the date of filing.)	te of filing: (OPTIONAL) pecific and cannot be more than five business days r
REQUIRED SIGNATURE:	ne Dahr, MGRM
(In accordance with sectio	r an authorized representative of a member. on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury are true.)
	Annie Nahon
Typed Filing Fees:	or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)