

LO9000120216

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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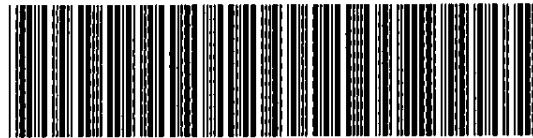
(Business Entity Name)

(Document Number)

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EXAMINER

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656-5454

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. 821 North Victoria Park Road  
(Corporation Name) (Document #)
2. LLC  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in    ☐ Pick up time    ☒ Certified Copy  
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**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☒ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

**ARTICLES OF ORGANIZATION FOR 821 NORTH VICTORIA PARK ROAD, LLC,  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

**821 North Victoria Park Road, LLC**

**ARTICLE II - Address**

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

748 Rue Marie-Reine-Clermont  
Laval, Quebec H7X3Y2

**ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:**

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

Louis Nostro, Esquire  
c/o Shutts & Bowen LLP  
201 South Biscayne Boulevard, Suite 1600  
Miami, Florida 33131

*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.*

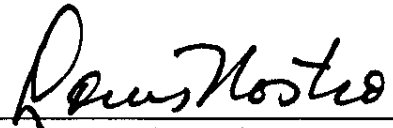
  
Louis Nostro, Registered Agent

**ARTICLE IV - Manager**

The name and address of the Manager is as follows:

Michael Didical  
748 Rue Marie-Reine-Clermont  
Laval, Quebec H7X3Y2

**REQUIRED SIGNATURE:**

  
Louis Nostro, Authorized Representative

(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.)

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