Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000057049 3)))



H100000570493ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

3,42/11)

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I2000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

GRETARY OF STATE HORION

Email Address:

FLORIDA LIMITED LIABILITY CO. CARO FAMILY REAL ESTATE INVESTMENTS, LLC.

·	
Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

H10000057049

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
CARO FAMILY Real ES (Must end with the words "Limited Liability	SLATE INVESTMENTS LLC.
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the recommendation of the recommendat	egistered agent are:
Name	FST/ FLO
Florida street addition of the street and to a street and to a	A
The il respect	77/81
City, State, ar	ا کا کا کا کا استان کا
The said seems the seems on all the rest to a	accept service of process for the above stated limited his certificate, I hereby accept the appointment as

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

H10000057049

Title:

H10000057049

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title:		
"MGR" = Man		
"MORM" = M	anaging Member	
MERM		Tuau Cano
		12555 BISCAUNE BLVD # 460
		NORTH MIQMI FL 33181
.100		
MGN		INGRID CAIZO. 12555 BISCAUNE BIND # 460
		NORTH MIAMI FL 33/8/
		•
•		
•		
(Use attachmen	nt if necessary)	
CLE V: Effective	e date, if other than the	date of filing: 3-/2-/0 (OPTIONAL)
CLE V: Effective date is	re date, if other than the listed, the date must b	e date of filing: (OPTIONAL) se specific and cannot be more than five business days prior
CLE V: Effective	re date, if other than the listed, the date must b	e specific and cannot be more than five business days prior
CLE V: Effective effective date is 0 days after the	re date, if other than the listed, the date must b date of filing.)	e specific and cannot be more than five business days prior
CLE V: Effective effective date is 0 days after the	re date, if other than the listed, the date must b	e specific and cannot be more than five business days prior
CLE V: Effective effective date is 0 days after the	re date, if other than the listed, the date must b date of filing.)	te specific and cannot be more than five business days prior
CLE V: Effective effective date is 0 days after the	re date, if other than the listed, the date must b date of filing.)	re specific and cannot be more than five business days prior
CLE V: Effective effective date is 0 days after the	re date, if other than the listed, the date must b date of filing.)	re specific and cannot be more than five business days prior
CLE V: Effective effective date is 0 days after the	re date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member (In accordance with se	er or an anthorized representative of a member. Control 608.408(3), Florida Statutes, the execution intutes an affirmation under the penalties of perjury
CLE V: Effective effective date is 0 days after the	re date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document const	er or an anthorized representative of a member. Control 608.408(3), Florida Statutes, the execution intutes an affirmation under the penalties of perjury

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)

Page 2 of 2