

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.

(((H10000068041 3)))



H100000880413ABCU

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE,

Account Number : 12000000019

: (305)552-5973

Phone 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.

Email Address:

FLORIDA LIMITED LIABILITY CO. LAS BRISAS WORLD ENTERPRISE LLC

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

CLINE MAR 2 6 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H10000068041

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(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: Mailing Address:
9435 SW 4h Street 8435 SW 4h S
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:
The name and the Florida street address of the registered agent are:
Nicky Bueno
Name 8455 50 4th Street Florida street address (P.O. Box NOT acceptable)
M. A: 33144
City, State, and Zip
Having been named as registered agent and to accept service of process for the above stated limited

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

H10000068041

Title:

H10000068041

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

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
$m \in \mathbb{R}$	N. K. I Brown
	4435 56) HTh sheet
	Migni, FL 253/44
	Pu
•	P.Z.
	S
	S
(Use attachment if necessary)	
(Ose autominent is necessary)	
CLE V: Effective date, if other than th	e date of filing: (OPTION
LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	te date of filing: (OPTION) be specific and cannot be more than five business d
REQUIRED SIGNATURE:	11
	70
Signature of a memb	er or an authorized representative of a member.
of this document cons	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury
that the facts stated	herein are true.)

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

Typed or printed name of signee