

L10000079379
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 tax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000171005 3)))



H100001710053ABCP

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 : KRISJOENNA SERVICES, INC.
Account Number : T200000000033
Phone : (786) 499-7132
Fax Number : (305) 644-3052

FILED
2010 JUL 28 AM 8:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
10 JUL 28 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.
TOCUVIME PROPERTY, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

C. LEWIS

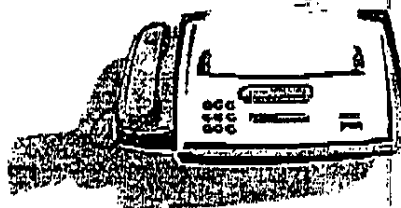
JUL 29 2010

EXAMINER

Help

Electronic Filing Menu Corporate Filing Menu

KRISJOENA SERVICES, INC.



FACSIMILE TRANSMITTAL SHEET

TO: Division of Corporation	FROM: Krisjoena Services
COMPANY:	DATE: 7/28/10
FAX NUMBER: 1850-617-6383	TOTAL # OF PAGES INCLUDING COVER: 4
PHONE NUMBER:	SENDER'S FAX NUMBER: 305-644-3052
RE:	

☒ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

2141 SW 1ST ST SUITE 110, MIAMI, FL 33135

TEL: 305-644-3055

FAX: 305-644-3052

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TOCUVIME PROPERTY, LLC

ARTICLE II - Address:

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

Principal Office Address:

Sebastian Tarallo (MGR)

Raul Heredia Sanchez (MGRM)

Mailing Address:

**3777 NW 46 ST.
MIAMI FLORIDA 33142**

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

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

**Daniel Suarez
Name**

**3777 NW 46 ST.
Florida, street address (P.O. Box NOT acceptable)**

**MIAMI FLORIDA 33142
City, 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 provide for in chapter 608 F.S.

Registered Agent's Signature

2010 JUL 28 AM 8:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FILED

2010 JUL 28 AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(CONTINUED)

Page 1 of 2

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

Title:

"MGR"= Manager

"MGRM"= Manager Member

Name and Address

Sebastian Tarallo (MGR)

Raul Heredia Sanchez (MGRM)

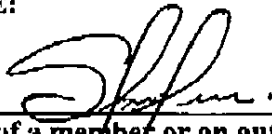
3777 NW 46 ST.

MIAMI FLORIDA 33142

(Use attachment if necessary)

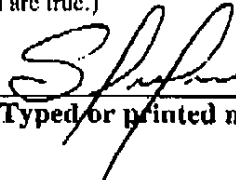
NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(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.)



Typed or printed name of signed

Page 2 of 2