

L10000081801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

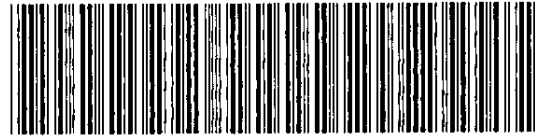
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800183744078

RECEIVED

10 AUG - 4 PM 4:19

B. KOHR

AUG - 4 2010

EXAMINER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

10 AUG - 4 PM 4:51



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 469245 7591651

AUTHORIZATION :

COST LIMIT : \$ 155.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 AUG - 4 PM 12:51

ORDER DATE : August 4, 2010

ORDER TIME : 2:50 PM

ORDER NO. : 469245-005

CUSTOMER NO: 7591651

DOMESTIC FILING

NAME: ABRANTE FAMILY INVESTMENTS,  
LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - EXT. 2951

EXAMINER'S INITIALS: \_\_\_\_\_

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Abrante Family Investments, LLC

(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:

9360 SW 68th St.

Miami, FL 33173

Mailing Address:

9360 SW 68th St.

Miami, FL 33173

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:

Key Registered Agents, Inc.

Name

1001 Brickell Bay Drive, Suite 3112

Florida street address (P.O. Box NOT acceptable)

Miami

FL 33131

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 provided for in Chapter 608, F.S..*

Joel J. Kay, President

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 AUG - 6 PM 4:51

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Abrante Family Management, LLC

1001 Brickell Bay Drive, Suite 3112

Miami, FL 33131

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

Joel J. Karp as a representative of a member  
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.)

Joel J. Karp, Esq.

Typed or printed name of signer

**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)**