

**L10000087766**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.**  
certified immo, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
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**D. BRUCE**

AUG 09 2010

**EXAMINER**

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Help

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**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY OF  
CERTIFIED IMMO, LLC**

**ARTICLE I**

**The name of the Limited Liability Company shall be:  
CERTIFIED IMMO, LLC**

**ARTICLE II**

**The Company is organized for any legal and lawful purpose for  
which a limited liability company may be organized pursuant to the Act.**

**ARTICLE III**

**This corporation shall commence existence on August 4<sup>th</sup> 2010.**

**ARTICLE IV**

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

2031 N.E. 123<sup>rd</sup> STREET, NORTH MIAMI, FL 33181

**ARTICLE V**

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

BELKIS SERRATA

2031 N.E. 123<sup>rd</sup> STREET, NORTH MIAMI, FL 33181

**ARTICLE VI**

**The name of the Manager(s) shall be:**

**MANAGER**

BELKIS SERRATA

2031 N.E. 123<sup>rd</sup> STREET, NORTH MIAMI, FL 33181

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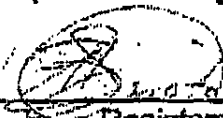
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CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED  
OFFICE/MEMBER/REPRESENTATIVE

CERTIFIED IMMO, LLC

(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

(X) 

Registered Agent

BELKIS SERRATA

(X) 

Signature of a member or an authorized representative of a member.

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(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.)

BELKIS SERRATA

Typed or printed name of signee

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