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EXAMINER



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COVER LETTER

	tration Section on of Corporations		
SUBJECT: 1775 W 39 PL, LLC			
Name of Limited Liability Company			
The enclosed A	rticles of Organization and fee(s) ar	e submitted for filing.	
Please return all	l correspondence concerning this ma	atter to the following:	
Greta I	P. Lozada		
		Name of Person	
JONAT	THAN H. GREEN & ASSOCIA	TES, P.A.	
	,	Firm/Company	
799 Bri	ickell Plaza, Suite 700	·	
		Address	
Miami,	Florida 33131		
		ity/State and Zip Code	
gpl@jh	glaw.com F-mail address: (to be used	for future annual report notification)	
For further infor	rmation concerning this matter, plea	•	
Greta P. Loz	ada	at (305) 372-5100	
	Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a c	check for the following amount:		
☑\$125.00 Filin	g Fee □\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

COMPANY NAME

The name of the Limited Liability Company is:

1775 W 39 PL, LLC

ARTICLE II

ADDRESS

The mailing address and street address of the principal office of 1775 W 39 PL, LLC is:

419 Aragon Avenue Coral Gables, Florida 33134

ARTICLE III

REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the Registered Agent are:

Jonathan H. Green & Associates, P.A. 799 Brickell Plaza, Suite 700 Miami, FL 33131

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.

Jonathan H. Green, Registered Agent

ARTICLE IV

MANAGEMENT

1775 W 39 PL, LLC is to be managed by one (1) member and is, therefore, a single member managed company. The name and address of the Managing Member is as follows:

SZM FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP, Manager/Member

419 Aragon Avenue Coral Gables, Florida 33134

ZAFER/MERCHANT, as General Partner