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(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:				
205,23494				
Office Use Only				



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10/06/10--01007--030 **130.00

SEFECTIVE DATE

SECRETARY OF STATE DIVISION OF CORPORATION:

N. Culligan OCT 19 2010

COVER LETTER

TO:

Registration Section

Division of Corporations				
SURJECT: INVE	RSIONES 7414 L	LC_		
		ed Liability Company		
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
ROBER	TO DE BIASE			
		Name of Person		
INVERS	IONES 7414 LLC			
		Firm/Company		
6824 NW	/ 77 CT			
		Address		
MIAMI FL	33166			
 	Cit	y/State and Zip Code		
<u>debias</u> e_r@	hotmail.com			
	E-mail address: (to be used	for future annual report notification)		
For further information	concerning this matter, please	e call:		
ROBERTO DE BIASE		_at (786) 9915806		
Name of Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, 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		



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 7, 2010

ROBERTO DE BIASE 6824 NW 77 COURT MIAMI, FL 33166

SUBJECT: AUTO LIMTED LLC Ref. Number: W10000047057

We have received your document for AUTO LIMTED LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 910A00023782

Neysa Culligan Regulatory Specialist II

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

The name of the Limited Liability Company is:				
INVERS	IONES 7414 LLC			
	(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")			
ARTICLE I	I - Address:			

Principal Office Address:

Mailing Address: 6824 NW 77 CT **MIAMI FL 33166**

6824 NW 77 CT

ARTICLE I - Name:

MIAMI FL 33166

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:

ROBERTO DE BIASE Name 6824 NW 77 CT Florida street address (P.O. Box NOT acceptable) MIAMI FL 33166 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

Title:	Name and Address:		
"MGR" = Manager "MGRM" = Managii	ng Member		
MGR	ROBERTO DE BIASE		
· · · · · · · · · · · · · · · · · · ·	6824 NW 77 CT		
	MIAMI FL 33166		
MGR	MIREYA CORDERO DE BIASE		
	6824 NW 77 CT		
	MIAMI FL 33166		
MGR	ROBERT DE BIASE		
	6824 NW 77 CT		
	MIAMI FL 33166		
MGR	FABRIZIO DE BIASE		
	6824 NW 77 CT		
	MIAMI FL 33166		
	, if other than the date of filing: 10/14/2010 . (OPTIO) the date must be specific and cannot be more than five business d		ior
<u>REQUIRED</u> SIGNA	ATURE:	10 OCT 18	SECRETARY OF CI
Signature of a member or an authorized representative of a member.			39 C
constitutes a I am aware	the with section 608.408(3), Florida Statutes, the execution of this document an affirmation under the penalties of perjury that the facts stated herein are true. That any false information submitted in a document to the Department of State a third degree felony as provided for in s.817.155, F.S.) Typed or printed name of signee	AH 7: 51	STATION

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)