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**EXAMINER** 



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(eff) as 10/18/10--01048--018 \*\*125.00

FILED

10 OCT 18 PM 1:25

SECRETARY OF STATE
ALLAHASSEF FLOOR

# **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations	
SUBJECT: 1800 EAST INVESTMENT	TS LLC
Name of Limited Lia	
The enclosed Articles of Organization and fee(s) are submi	itted for filing.
Please return all correspondence concerning this matter to	the following:
LUIS DORADO M.	
Namo	e of Person
Firm,	n/Company
31 SE , 5TH ST., SUITE 414	
A	Address
MIAMI FL 33131	
	e and Zip Code
luisdoradom@gmail.com  E-mail address: (to be used for futu	
	•
For further information concerning this matter, please call:	
CONSTANZA LINA PROFETA	305 4016335
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status	\$155.00 Filing Fee & \$\ \text{Certified Copy} \text{Certified Copy is enclosed} \text{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 - Name:**

The name of the Limited Liability Company is:

# 1800 EAST 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:	Mailing Address:
31 SE., 5TH ST., SUITE 414	31 SE., 5TH ST., SUITE 414
MIAMI FL 33131	MIAMI FL 33131

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:

CONSTANZA L. PROFETA

Name

31 SE., 5TH ST., SUITE 414

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

MIAMI FL

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	LUIS DORAMO M.
	31 SE., 5TH ST., SUITE 414
	MIAMI FL 33131
MGR	HECTOR DORADO M.
	31 SE., 5TH ST., SUITE 414
	MIAMI FL 33131
(Use attachment if necessary)	
• ,	
CLE V: Effective date, if other the	an the date of filing: (OPTIONAL)
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effective date is listed, the date m 0 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a n  (In accordance with section constitutes an affirmation	nember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true.
effective date is listed, the date me do days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a neconstitutes an affirmation I am aware that any false	nember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State
effective date is listed, the date model of days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a note that any false is setting to the date of filing.)	nember or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true.

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)