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Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

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FLORIDA LIMITED LIABILITY CO.

ZUBRA PROPERTIES LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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11 MAR 17 PM 3:33

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TALLAHASSEE, FLORIDA

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G. MCLEOD

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Help

MAR 18 2011

EXAMINER

H11000070043

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ZUBRA PROPERTIES 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:

4580 NW 114th AVENUE #1210
DADE FL 33178

Mailing Address:

4580 NW 114th AVENUE #1210
DADE FL 33178

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:

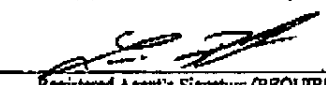
LUIS ROSALES

Name

5931 NW 173RD STE 9Florida street address (P.O. Box **NOT** acceptable)MIAMI FL 33015

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

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11 MAR 17 AM 8:34
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H11000070043

H11000070843

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:MGRMMARCO BRAVO
4580 NW 114TH AVE #1210
DORAL FL 33178MGROMAR ZULUAGA
4580 NW 114TH AVE #1210
DORAL FL 33178MGREDGAR RICO
4580 NW 114TH AVE #1210
DORAL FL 33178

(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:
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

WIS ROSALES
Typed or printed name of signee**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)

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