# 100037427

(Requestor's Name)	
(Address)	900198
(Address)	03/29/11
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	E DATE 3 22 2011
Office Use Only	B. KOHR
	""



198356789

\*\*155.00 9/11--01007--013

11 MAR 29 AM 10: 50

MAR 2 9 2011

**EXAMINER** 

## LAZARUS

### CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

EFFECTIVE DATE 3/22/2011

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Pick up time Mail out Certificate of Status Will wait Photocopy **NEW FILINGS AMENDMENTS** Profit **A**mendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

EFFECTIVE DATE 3/22/2019

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPA

ARTICLE I - Name: The name of the Limited Liability Company is:	No. St
Acuya LLC (Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC" or "L.C.")
ARTICLE II - Address:	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2600 Douglas Road, Suite 811	2600 Douglas Road, Suite 811
Coral Gables, Florida 33134	Coral Gables, Florida 33134
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the revenue Valentin Lopez c/o Lopez	egistered agent are:
Name	
2600 Douglas Ro	ad, Suite 811
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)
Coral Gables City, State, ar	FL 33134
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered 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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing	Member
MGRM	Diego Augusto Yaluk Luraghi
	2600 Douglas Road, Suite 811
	Coral Gables, Florida 33134
MGR	Ignacio Humberto Acuna Gomez
	2600 Douglas Road, Suite 811
	Coral Gables, Florida 33134
	<u> </u>
(II	
(Use attachment if nece	ssary)
	other than the date of filing: March 22, 2011 (OPTIONAL) e date must be specific and cannot be more than five business days possible at the control of the c
•	umg.)
REQUIRED SIGNAT	
•	
REQUIRED SIGNAT	URE:
REQUIRED SIGNAT	URE: ure of a member or arrauthorized representative of a member.
REQUIRED SIGNAT  Signate (In acc	URE: