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# Florida Department of State

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Account Name : ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA, P.A.

Account Number : 076624003440 Phone : (305)444-6226 Fax Number : (305)442-4829

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JUN - 9 2011

EXAMINER 06/08/11

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#### **ARTICLES OF ORGANIZATION**

#### <u>OF</u>

#### MESA LATINA, LLC

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

### ARTICLE I NAME

The name of this Limited Liability Company is: MESA LATINA, LLC.

## ARTICLE II GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

# ARTICLE III TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

#### ARTICLE IV

The principal office and mailing address of this Limited Liability Company in the State of Florida is 9999 NE 2<sup>ND</sup> AVE, STE. 312, MIAMI SHORES, FL 33138. The Board of Managers may from time to time move the principal office to another address in Florida.

# ARTICLE V REGISTERED OFFICE, REGISTERED AGENT

That MESA LATINA, LLC, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the ArtIcles of Organization at the County of Miami-Dade, State of Florida, hereby designates ARAZOZA & FERNANDEZ-FRAGA, P.A., as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134.

My commission expires:

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## ARTICLE VI MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The initial Managers shall be:

CORINA MASCARO of 9999 NE 2<sup>nd</sup> Ave Ste. 312, Miami Shores, FL 33138

CELESTE DE ARMAS of 9999 NE 2<sup>nd</sup> Ave Ste. 312, Miami Shores, FL 33138

WITNESS the hand and seal of the Manager in Miami-Dade County, State of Florida, this 2 th day of June, 2011.

	CORINA MA	Marco	
	Manager	F	<u> </u>
STATE OF FLORIDA )	e.	LAHASS	TUUN - 8
COUNTY OF MIAMI-DADE		العاً العا	
PERSONALLY appeared before me LATINA, LLC, who is personally knownas ident	n to me or who presen tification_and∕who_bei	ted her <u>+LOUAN</u> ng by me first dùl	MESA A
acknowledges that she signed the sam	he for the purposes the	erein expressed.	
WITNESS my hand and seal at Miam 2011.	ni-Dade County, Florid	a this 8 th day	of June,
NOTARY PUBLIC STATE OF FLORIDA Laure Kohn Commission #DD770888	Misilingini	A Marion	
BONDED THRO ATLANTIC BONDING CO., INC.	NOTARY BUBLIC	FLORIC	DĀ
	AT LARGE	- (	•

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That MESA LATINA, LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, has named ARAZOZA & FERNANDEZ-FRAGA, P.A. as its Agent, of 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134, to accept service of process within Florida.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

The Registered Agent Arazoza & Fernandez-Fraga, P.A.

By: \_\_\_\_\_\_

Director

Date: June 06, 2011

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