

L12000007840

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

371517

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H120000141463)))



H120000141463ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
1020 NW 126 STREET, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

C. LEWIS

JAN 18 2012

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

FILED
 2012 JAN 17 AM 7:58
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

RECEIVED
 12 JAN 17 AM 6:52
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

H12000014146

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

1020 NW 126 STREET, 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:

4775 COLLINS AVENUE, SUITE 3205

SAME

MIAMI BEACH, FL 33140

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

ANTHONY MISURACA

Name

4775 COLLINS AVENUE, SUITE 3205

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

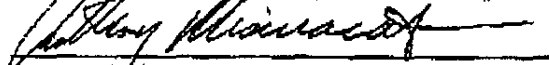
MIAMI BEACH, FL 33140

City, State and Zip

2012 JAN 17 AM 7:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Having been named as registered agent and to accept service to process for the above stated liability company of 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 in Chapter 608, F.S.



Registered Agent's Signature

(CONTINUED)

H12000014146

H 12000014146

ARTICLE IV - Manager(s) of 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:

MGRM

ANTHONY MISURACA

4775 COLLINS AVENUE, SUITE 3205

MIAMI BEACH, FL 33140

MGRM

MGRM

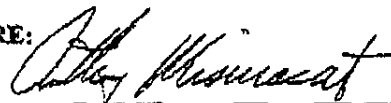
MGRM

FILED
2012 JAN 17 AM 7:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of 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.)

ANTHONY MISURACA

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)

H 12000014146