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Fax Number : (850) 617-6383

From: Account Name : GEOFFREY M. WAYNE, P.A.
Account Number : 076770003401
Phone : (305) 381-8108
Fax Number : (305) 402-2424

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FLORIDA LIMITED LIABILITY CO.

77 Miami View LLC

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FAX COVER SHEET

TO

COMPANY

FAX NUMBER 18506176383

FROM Maggie Fleagle

DATE 2012-01-23 20:34:17 GMT

RE 77 Miami View LLC

COVER MESSAGE

alexis mayor, legal assistant
law offices of geoffrey m. wayne, p.a.
merrick view - penthouse 840
135 san lorenzo avenue
coral gables, fl 33146-1527
voice 305.381.8108
direct line 786.709.4604
main fax 305.402.2424
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www.abogadomiami.com

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: 77 Miami View LLC

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 4779 Collins Avenue Apt. 2001, 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:

Geoffrey M. Wayne, Esq.
135 San Lorenzo Avenue
PH 840
Coral Gables, FL 33146

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.

Geoffrey M. Wayne
Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable.)

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

ARTICLE V - That the Member and Officer of the Company is:

Joseph Frantz Boulos - Member/President/Secretary

(An additional article must be added if an effective date is requested)

Geoffrey M. Wayne, Authorized Representative
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.)

Geoffrey M. Wayne
Typed or printed name of signer

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)

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