

L120000183/3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT

FEB - 7 2011

EXAMINER

Office Use Only



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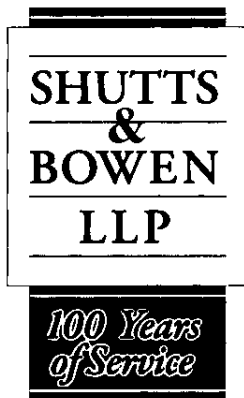
02/06/12--01026--016 **160.00

SECRETARY'S STATE
TALLAHASSEE, FLORIDA

2012 FEB - 6 PM 3:58

FILED

LOUIS NOSTRO
DIRECT LINE (305) 379-9164
FLORIDA BAR BOARD CERTIFIED
IN THE AREAS OF TAXATION
WILLS, TRUSTS & ESTATES



EMAIL ADDRESS:
LNOSTRO@SHUTTS-LAW.COM

February 1, 2012

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, Florida 32314

Re: 441 Valencia, LLC

Gentlemen:

I enclose for filing the Articles of Organization for **441 Valencia, LLC**, along with a check for \$160.00 (to cover the filing fee, certified copy and certificate of status). A return envelope is enclosed for your convenience.

Please contact me if you have any questions. Thank you for your assistance.

Sincerely,


Louis Nostro

LN/sxp
Enclosure

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

441 VALENCIA 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:

500 S. Dixie Highway, #303
Coral Gables, FL 33146

Mailing Address:

500 S. Dixie Highway, #303
Coral Gables, FL 33146

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:

Louis Nostro, Esq.

Name

Shutts & Bowen LLP, 201 S. Biscayne Blvd. Ste 1600

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

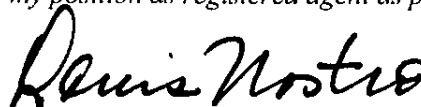
Miami

FL

33131

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)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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:

MGRM

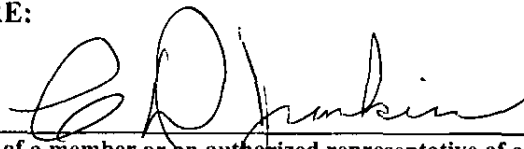
Cynthia Dembrow Junkin
500 S. Dixie Highway, #303
Coral Gables, FL 33146

(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.)

Cynthia Dembrow Junkin

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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TALLAHASSEE, FLORIDA