

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
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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.

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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.
SEASIDE VILLAS LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

FILED
12 FEB 28 AM 8:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
12 FEB 28 AM 7:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

FEB 29 2012

EXAMINER

Electronic Filing Menu Corporate Filing Menu

112000052892

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Seaside Villas LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

clo V Chen, 5955 Ponce de Leon Blvd, Coral Gables, FL

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

33146

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

Vin Chen

Name

5955 Ponce de Leon Blvd

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

Coral Gables

FL 33146

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.

[Handwritten Signature]

Registered Agent's Signature

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

[Handwritten 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.)

Vin Chen

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 FEB 28 AM 8:32

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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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