

L12000043472

(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:

Office Use Only



100226240341

03/28/12--01007--017 **1395.00

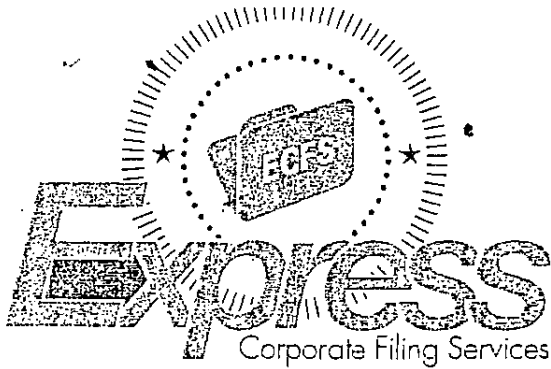
RECEIVED
12 MAR 28 AM 10:44
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
12 MAR 28 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

MAR 29 2012

EXAMINER



1000 Ponce de Leon Blvd. Suite: 101

Coral Gables, FL 33134

Phone: 305 444 4994

Email- filing@ecfsfiling.com

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. CRYSTAL MANSION-KINA, LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input checked="" type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|----------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|-----------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

FILED
 12 MAR 28 AM 9:21
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY

ARTICLE I

NAME

The name of the Limited Liability Company is:

CRYSTAL MANSION-KINA, LLC.

ARTICLE II

The mailing address and street address of the principal office of the
Limited Liability Company is: 250 Catalonia Avenue, Suite 801, Coral
Gables, Florida, 33134.

ARTICLE III

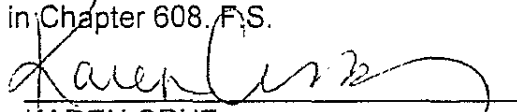
Registered Agent, Registered Office, and Registered Agent's

Signature:

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

NAME: KAREN CRUZ
ADDRESS: 250 Catalonia Avenue, Suite 801
Coral Gables, Florida 33134

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.


KAREN CRUZ
Registered Agent

FILED
12 MAR 28 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV – Management

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

KINA INVESTMENT, INC.
MEMBER-MANAGER

BY: 
ETTORE NARDI, President

(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).

FILED
12 MAR 28 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA