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(((H12000088161 3)))



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EXAMINER

4/4/2012

ARTICLE I - Name:

H12000088161

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

THO HAIRE OF G	c Difficed Disputity Co	ompany is;
LAM	FLORIDA Must end with the words "	PROPERTIES, LLC.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		

Frincipa Office Audress;	Maning Address:
72755.W.90St#C-5	17 7275 S.W. 90St. C-ST. MIANI, FI 33156
MIAMI, F(, 33156	MANI, F1, 33156

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;

TOSE GUTIERREZ

Name

72755.W. 90 St. #C-517

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

MIAMI

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.

(CONTINUED)

Page 1 of 2

H12000088161

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u> Citle:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	•
PRESIDENT	JOSE GUTIERREZ 72755.W. 908t, #C-517 MIANI, F1,33156
VICE-PRESIDENT	YOCEL! SINENEZ 12755W, 90 ST # C-517 MIAMILE, 33156
	•
*	
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing:

(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.)

<u>REOUIRED</u> SIGNATURE:

or an authorized representative of a member.

(In accordance with section 608,408(3), Florida Stantes, the execution of this document constitutes an affirmation under the parallies 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.)

Page 2 of 2