

L12000064623 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

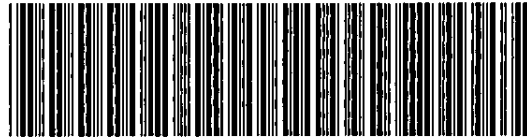
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
MAY 14 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LUKI LAKES LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PEDRO F. MARTELL

Name of Person

PEDRO F. MARTELL, P.A.

Firm/Company

9485 S.W. 72 STREET, SUITE A-265

Address

MIAMI, FL 33173

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEDRO F. MARTELL

Name of Person

at (305) 275-0077

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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DEPARTMENT OF STATE

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The name of the Limited Liability Company is:

LUKI LAKES LLC.

ARTICLE II – Address:

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

Principal Office Address:

**2276 S.W. 142nd Place
Miami, Florida 33175**

Mailing Address:

**2276 S.W. 142nd Place
Miami, Florida 33175**

ARTICLE III

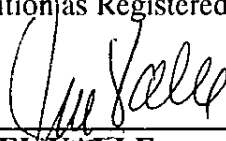
**Registered Agent, Registered Office and
Registered Agent's Signature:**

The name and the Florida street address of the Registered Agent are:

**JUAN DEL VALLE
2276 S.W. 142nd Place
Miami, Florida 33175**

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TALLAHASSEE, FLORIDA

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.



JUAN DEL VALLE

ARTICLE IV – Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

MGR/MGRM


Enrique Galindo Martens
Av. Del Rodeo 35 B. Los Penascales,
Torrelodones, 28250, Madrid, Spain
M 28250 MA

MGR/MGRM

Lourdes Alvarez Menendez
Av. Del Rodeo 35 B. Los Penascales,
Torrelodones, 28250, Madrid, Spain

ARTICLE V

The effective date shall be the date of filing.



JUAN DEL VALLE

(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.).

This instrument was prepared by:
Pedro F. Martell, Esq.
9485 S.W. 72nd Street, Suite A-265
Miami, FL 33173

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA