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EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: C.H.I. Realty		
Name of Lin	nited Liability Company	
The enclosed Articles of Organization and fec(s) as	re submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Luis Iglesias		
	Name of Person	-
C.H.I. Realty, LLC		
	Firm/Company	•
1936 Boothe Circle		_
	Address	•
Longwood, FL 32750		
	City/State and Zip Code	
luis@luisiglesias.net		<del></del>
E-mail address: (to be used	d for future annual report notification)	
For further information concerning this matter, plea	se call:	
Luis Iglesias III	at (786 ) 395-0341	7012 MY 15
Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	Area Code & Daytime Telephone Number	5 7
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}	S155.00 Filing Fee & S160.00 Filing Fee.  Certified Copy Certificate of Stant & Certified Copy (additional copy is enclosed)	112:0
Malling Address	Street/Conrier Address	

Registration Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	ny is:	
C.H.I. Realty, LLC		
(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liab	oility Company is:
Principal Office Address:	Mailing Address:	
1936 Boothe Circle Longwood, FL 32750	1936 Boothe Circle Longwood, FL 32750	
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agent's S Registered Agent. You must designate an individu	Signature: ual or another
The name and the Florida street address of	f the registered agent are:	IAS E
Neil-Anthony Hyle	r	ZUIZ MAY 15 SECRETARY ALEAHASS
	Name	HAT THE
872 Blairmont	Lane	m ~
Florida str	cet address (P.O. Box NOT acceptable)	
Lake Mary	<sub>FL</sub> 32746	PH 12: 6
	ity, State, and Zip	ĝą o

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)

Page 1 of 2

## 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" = Manager "MGRM" = Managing Me	mber
<del>-</del> -	
MGRM	Luis Iglesias III
	15961 SW 146 Terrace
	Miami, FL 33196
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	ACCURATION OF THE PARTY OF THE
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71	<del>, 5</del> -
(Use attachment if necessar	y)·
OT TO Mr. Defination data if ath.	er than the date of filing: (OPTIONAL)
	· · · · · · · · · · · · · · · · · · ·
enective date is listed, the da 90 days after the date of filing	ate must be specific and cannot be more than five business days prior
50 days after the date of ming	5·7
REQUIRED SIGNATUR	E:
-	
	un desces
Signature of	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 aftirn	nation under the penalties of periury that the facts stated become are to a
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.)

Luis Iglesias

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)