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K. SALY EXAMINER JUN 1 4 2012

LAZARUS

CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

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ORPORATION NAME(S) & DOCUMENT NUM	MBER(S), (if known):
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NEW FILINGS AMEN	<u>DMENTS</u>
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	signation of R.A., Officer/Director
	ange of Registered Agent
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OTHER FILINGS REGIS	TRATION/QUALIFICATION
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☐ Fictitious Name ☐ Lii	nited Partnership
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CR2E031(7/97)	Examiner's Initial

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name: The name of the Limited Liability (Company is: MULTIMED	IA PROPERTY, LLC.
ARTICLE II- Address: The mailing address and street address	ress of the principal office of the	e Limited Liability Company is:
10955 SW 177 Terr., ARTICLE III- Registered Agent		
		<u> </u>
The name and the Florida street add	dress of the registered agent are:	JE SCHOOL STATE
	CARLOS B. DUOL	
	Name	5 5
	10955 SW 177 Terr	· · · · · · · · · · · · · · · · · · ·
	Florida street address (P.O Box N	OT acceptable)
	Miami FL 331	157
	City, State, and	
ARTICLE IV Management (Ch The Limited Liability Compartherefore, a manager- managed con	Registered Agent's Sign heck box if applicable) ny is to be managed by one man	ature
(An add	ditional article must be added if	an effective date is requested)
In accordance with section 608.408 affirmation under the penalties of pe	(3), Florida Statutes, the executerjury that the facts stated herein	tion of this document constitutes an are true.
Signature of a member/Manager		CARLOS_BDUQUE
Signature of a member/Manager		Typed or printed name of signee
Signature of a member/Manager		Typed or printed name of signee

Typed or printed name of signee

Signature of a member/Manager