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## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NRAI SERVICES, LLC

Account Number: I20080000104 Phone : (302)674-4089

Fax Number : (302)674-5266

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

sserna@crescentheights.com Email Address:

먑

## FLORIDA LIMITED LIABILITY CO. MJJK SNATCH, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	
ARTICLE I - Name:	
The name of the Limited Liability Company	is:
MJJK SNATCH, LLC	•
(Must end with the words "Limited Lis	ability Company, "L,L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2200 BISCAYNE BOULEVARD, 7TH FL	2200 BISCAYNE BOULEVARD, 7TH FL
MIAMI, FL 33137	MIAM!, FL 33137
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own Rej	ed Office, & Registered Agent's Signature:
business entity with an active Florida registration.)	Proposed LEGALT 1 ON Ultrat persuance on management or properties

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

DAYAMI AGUIAR

Name

2200 BISCAYNE BOULEVARD

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

MIAMI

FL 33137

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)

red Agent's Signature (REQUIRED)

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SECRETARY OF STATE
OFFICE OR OF CORPORATIONS
19 IIIN 20 AM 7: 1.5

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	MJJK HOLDINGS, LLC
	2200 BISCAYNE BOULEVARD
	MIAMI, FL 33137
(Use attachment if necessary)	
LE V: Effective date, if other than	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days pr
0 days after the date of filing.)  REQUIRED SIGNATURE:	Daway  emberor an authorized representative of a member.
O days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a me	emberor an authorized representative of a member.  n 608.408(3), Florida Statutes, the execution of this document under the ponalties of perjury that the facts stated herein are true.

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)

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DAYAMI AGUIAR, Authorized Representative Typed or printed name of signee