

09/04/2012 14:16

CORPOLICENSE INC.

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Division of Corporations

**L12000113602**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : CORPOLICENSE, INC  
Account Number : 120050000118  
Phone : (305) 774-9606  
Fax Number : (305) 774-9660

SEP 5 2012  
L. SELLERS

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

Email Address: 2amlas03@gmail.com

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**FLORIDA LIMITED LIABILITY CO.  
Madeira Homes LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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H12000219041

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY  
OF  
MADEIRA HOMES, LLC**

**ARTICLE I - NAME:**

The name of the Limited Liability Company Is:

**MADEIRA HOMES, LLC**

**ARTICLE II - ADDRESS:**

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

**Principal Office Address:**

441 Madeira Ave  
Coral Gables, FL 33134

**Mailing Address:**

441 Madeira Ave  
Coral Gables, FL 33134

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**



**Lilia P. Lasprilla  
441 Madeira Ave  
Coral Gables, FL 33134**

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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.

  
\_\_\_\_\_  
Lilia P. Lasprilla

**ARTICLE IV - Management/Member(s):**

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

<b><u>TITLE:</u></b>	<b><u>NAME AND ADDRESS:</u></b>
<b>MGR M</b>	<b>Lilia P. Lasprilla 441 Madeira Ave Coral Gables, FL 33134</b>

(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)

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