

FLORIDA DEPARTMENT OF STATE
Division of Corporations
Electronic Filing Cover Sheet

L12000156188

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000292162 3)))



H120002921623ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

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

Email Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 DEC 13 AM 11:10

APPROVED
AND
FILED

**FLORIDA LIMITED LIABILITY CO.
MEDINA LAND HOLDINGS #7 LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED

12 DEC 13 PM 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

D. BRUCE

DEC 14 2012

EXAMINER

EFFECTIVE DATE 01/01/13

H12000292162

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

MEDINA LAND Holdings # 7 LLC

(Must end with the words "Limited Liability 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:7870 SW 74 ST
MIAMI, FL 33143**Mailing Address:**7870 SW 74 ST
MIAMI, FL 33143**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

RAUL MEDINA, JR
Name7870 SW 74 STFlorida street address (P.O. Box **NOT** acceptable)MIAMI FL 33143

City, State, and Zip

12 DEC 13 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDAAPPROVED
AND
FILED

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

EFFECTIVE DATE 01/01/13

H12000292162

H12000292162

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRMRAUL MEDINA7870 SW 74 STMIAMI FL 33143MGRILEANA MEDINA7870 SW 74 STMIAMI FL 33143MGRRICK MEDINA7870 SW 74 STMIAMI FL 33143MGRIXEL M UTSET7870 SW 74 STMIAMI FL 33143

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1/1/13 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature 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 affirmation under the penalties of perjury that the facts stated herein are true.)

RAUL MEDINA JR

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)

H12000292162

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 DEC 13 AM 11:11

APPROVED
AND
FILED