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FLORIDA LIMITED LIABILITY CO.

MASTER KEY INVESTMENT

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EXAMINER

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| H 13000162636 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY ARTICLE I - Name: The name of the Limited Liability Company is: MASTER (Must end with the words "Limited Liability Configury. "L.L.C." or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Principal Office Address: 7130 Miller DR Mailing Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's S (The Limited Liability Company amnot serve at its own Registered Agent. You must designate an individual business entity with an active Florida registration.) The name and the Floridal street address of the registered agent are: A | |
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| ARTICLE I - Name: The name of the Limited Liability Company is: MASTER KEY LINESTME | #4261 P.002/00 |
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| ARTICLE II - Name: The name of the Limited Liability Company is: MASTER EY INVESTME (Must end with the words Limited Liability Company, "L.L.C." or "LL.C.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Principal Office Address: Mailing Address: Mailing Address: Mailing Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's S (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual business entity with an active Fluidia registration.) The name and the Florida street address of the registered agent are: PAFAEL Name TIBO Name TIBO Name TIBO North Company of the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with the statutes relating to the proper and complete performance of my duties, and I am is statutes relating to the proper and complete performance of my duties, and I am is | |
| The name of the Limited Llability Company is: MASTER Ey INVESTME | COMPANY |
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| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's S. (The Limited Liability Company damot serve as its own Registered Agent. You must designate an individual business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: RAFAEL HUQUET Name TI30 MillER DRIVE Florida street address (P.O. Box NOT acceptable) MillER DRIVE Florida street address (P.O. Box NOT acceptable) City, State, and Zip Having been named as registered agent and to accept service of process for the abuse of liability company at the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with the statutes relating to the proper and complete performance of my duties, and I am J | ity Company is: |
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| (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual business entity with an active Flurida registration.) The name and the Florida street address of the registered agent are: AFAEL HUGUET Name 7130 MillER DRIVE Florida street address (P.O. Box NOT acceptable) Miamil FL 33155 City, State, and Zip Having been named as registered agent and to accept service of process for the abliability company at the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with the statutes relating to the proper and complete performance of my duties, and I am J | |
| PAFAEL HUGUET, Name 7130 MILER DRIVE Florida street address (P.O. Box NOT acceptable) Miami FL 33155 City, State, and Zip Having been named as registered agent and to accept service of process for the abliability company at the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with the statutes relating to the proper and complete performance of my duties, and I am J | gnature: or another |
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| statutes relating to the proper and complete performance of my duties, and I am j accept the obligations of my position as registered agent as provided for in Cha | ppointment as e provisions of all |
| | umiliar with and pter 608, F.S |
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| Registered Rent's Signature (REQUIRED) | |
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| | 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 | | | |
| | MGRM RAFAEL HUGUET, SR Miami Fi 33155 | | | |
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| | (Use attachment if necessary) | | | |
| ARTICLE V: Effective date, if other than the date of filing: (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 of an authorized representative of a member. | | | |
| | (In accordance with section 668.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.) | | | |
| | Typed or printed name of signee | | | |
| | Page 2 of 2 | | | |
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