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(((H13000176453 3)))



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Account Name

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Account Number : I20000000019

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> FLORIDA LIMITED LIABILITY CO. MIAMI HITCHES LLC

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## H13000176453

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIAB	ILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	•
Miami Hitches 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: Mailing Address:	
735 W 78 st 735 W 78 s Hialean FL 33014. Hialean FL 33	t- 2014
ARTICLE III - Registered Agent, Registered Office, & Registered Agent. (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an in business entity with an active Florida registration.)	nt's Signature: ndividual or another
The name and the Florida street address of the registered agent are:	
Edwin Espinal	•
135 w 78 st Hialean FL 33014 Florida street address (P.O. Box NOT acceptable)	<del>.</del>
Highean FL FL 33014 City, State, and Zip	
Having been named as registered agent and to accept service of process for liability company at the place designated in this certificate, I hereby accept registered agent and agree to act in this capacity. I further agree to comply statutes relating to the proper and complete performance of my duties, and accept the obligations of my position as registered agent as provided for	pt the appointment as with the provisions of all I am familiar with and
Registered Agent's Signature (REQUIRED)	SECRE DIVISION 13 AUG
Kediziesen Väeur 3 sikustus (vendouven)	G - 8
	A STATE
(CONTINUED) Page 1 of 2	STAIL BRATION 7: 25

## H13000178453

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" * Managing Member	•
MGAM	Edwin Espinal 735 w78 St Higlean 33014
MGRM	Henryn Tejeda 8966 NW 1125t Hiclean Gardens FL 33018
(Use attachment If necessary)	F.,
ARTICLE V: Effective date, if other than the an effective date is listed, the date must	he date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	14
Signature of a mer	har as an authorized representative of a member,

(In accordance with section 608.406(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.)