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VED	AH 8: 00	CFSTATES E. FLORIBA	Account Name Account Number Phone Fax Number	: LAZARUS CORPORATE FILING SERVICE, INC. : I20000000019 : (305)552-5973 : (305)220-1440	SEP 26 M RETAKY OF S AHASSEE, FL	FILED
	3 SEP	i., <u>rannual</u>	email address f report mailing: Address:	or this business entity to be used for fut s. Enter only one email address please.**	` <u>⇔</u>	

# FLORIDA LIMITED LIABILITY CO. INTERINVESTMENT MANAGEMENT GROUP LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
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ARTICLE I - Name:

The name of the Limited Liability Company is:

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

THERINUSTMENT Hanggement Group LCC

(Must end with the words "Limited Liability Company, "LR.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:

Trincipal Other Address.	Titling / Kurl 533.
13727 SW 152 ST	SAME ZE
# 385	
MIAMI FL 33/71	
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registe business entity with un active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
MARLENY	ZAPATA
'Name	
13727 80	W.152 ST #385
Florida street addi	ress (P.O. Box <u>NOT</u> acceptable)
miani	The state of the s
City, State, ar	nd 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..

Registered Agent's Signature (SEQUIRED

(CONTINUED)
Page 1 of 2

# H13000214876

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

Title: "MGR" = Manager	Name and Address:					
"MGRM" ⇒ Managing Member  M (⇒ R M	MARLENY ZAPATA 13727 15W 15251 # 385 minn, FC 33177					
(Use ottook ment if accessory)						
(Use attachment if necessary)  FICLE V: Effective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be more than five business days prior  90 days after the date of filing.)						
REQUIRED SIGNATURE:  L. Class Signature of a men	SET ARY OF SET AND SET					
constitutes an affirmation un	508.408(3), Florida Statutes, the execution of this document ider the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.)					