

OCT-04-2013 04:47 PM FROM

**L13000140505**

T-000 P.001/002 F-177

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

((H130002216173)))



H130002216173ABCX

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

RECEIVED

13 OCT -4 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

From: Account Name : AKERMAN SENTERFITT (MIAMI)  
Account Number : 075471001363  
Phone : (305) 374-5600  
Fax Number : (305) 374-5095

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
VILLA PINA, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 OCT -4 AM 7:21

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

OCT -7 2013

**ARTICLES OF ORGANIZATION  
OF**

**VILLA PINA, LLC** 2013 OCT -4 AM 7:21

**FILED**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I: - Name**

The name of the Limited Liability Company is **VILLA PINA, LLC**

**ARTICLE II: - Address**

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

**c/o Frank Rodriguez Melo, CCIM  
605 W Flagler St.  
Miami, FL 33130**

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

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

**Melo Real Estate  
Frank Rodriguez Melo, CCIM  
605 W Flagler St.  
Miami, FL 33130**

*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.*

**MELO REAL ESTATE**

By: 

Name: Frank Rodriguez Melo, CCIM

Title: Registered Agent

**ARTICLE IV: - Management**

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

  
Frank Rodriguez Melo, CCIM, Authorized Representative

(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.)

Frank Rodriguez Melo, CCIM  
Typed or printed name of signee