

3053818109

GEOFFREY M WAYNE PA

Division of Corporations

48 p 11/21/13 1/2
http://efil.sunbiz.org/script/filcovr.exe

L13000148097

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.

(((H13000233462 3)))



H130002334623ABCY

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 : GEOFFREY M. WAYNE, P.A.
Account Number : 076770003401
Phone : (305)381-8108
Fax Number : (305)381-8109

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 OCT 21 AM 9:30

FILED

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

Email Address: mf@abogadomiami.com

**FLORIDA LIMITED LIABILITY CO.
305 West Di Lido Drive LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

OCT 22 2013
T CLINE

RECEIVED
13 OCT 21 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H13000233462 3

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

The name of the Limited Liability Company is: **305 West Di Lido Drive LLC**

ARTICLE II - Address:

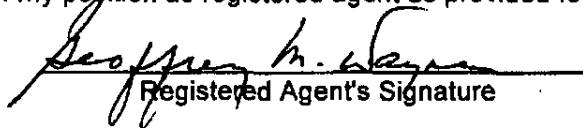
The mailing address and street address of the principal office of the Limited Liability Company is: **380 N.E. 67th Street, Miami FL 33138.**

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

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

Geoffrey M. Wayne, Esq.
135 San Lorenzo Ave.,
PH 840
Coral Gables, Florida 33146-1513

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

2013 OCT 21 PM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV - Management (Check box if applicable.)

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

ARTICLE V - That the Sole Member and Officers of the Company are:

Alek Doura Irrevocable Trust
Jocelyn Hider

Sole Member
President

(An additional article must be added if an effective date is requested)


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.)

Geoffrey M. Wayne
Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)

H13000233462 3