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Certified Copies	- Certificate	s of Status
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Special Instructions to	Filing Officer:	·
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Office Use Only



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13 OCT 24 AM 9: 02 SECRETARY OF STATE

William F. FACO

(850) 245-6051.

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

MIA 711 INVESTMENTS, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maria I. Arisso

Name of Person

MIA 711 INVESTMENTS, LLC

Firm/Company

650 NE 52nd Terrace

Address

Miami, FL 33137

City/State and Zip Code

miarisso711@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria I. Arisso

,786

351-5806

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

■ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



October 14, 2013

MARIA I ARISSO MIA 711 INVESTMENTS, LLC 650 NE 52ND TERRACE MIAMI, FL 33137

SUBJECT: MIA 711 INVESTMENTS, LLC

Ref. Number: W13000057080

We have received your document for MIA 711 INVESTMENTS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown Regulatory Specialist II

Letter Number: 813A00024063

ARTICLE'S OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		.
The name of the Limited Liability Company	is:	整点个
MIA 711 INVESTMENTS, LLC		30CT 24 M 9:02
	Liability Company, "L.L.C.," or "LLC.")	The 3
		72.0
ARTICLE II - Address:		(A) (A) (A)
The mailing address and street address of the	e principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
650 NE 52nd Terrace	650 NE 52nd Terrace	
Miami, FL 33137	Miami, FL 33137	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the server is the server in the server in the server is the server in the server is the server in the server is the server in the server in the server in the server in the server is the server in the	egistered Agent. You must designate an indi-	
Maria I. Arisso		
	ame	
650 NE 52nd Terrace		
Florida street	t address (P.O. Box NOT acceptable)	
Miami, FL 33137	FL	
City	, State, and Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap all statutes relating to the proper and comp	in this certificate, I hereby accept pacity. I further agree to comply w	the appointment as vith the provisions of

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

	Manager = Managing Membe	Name and Address:
MGRM		Maria I. Arisso
	- /	650 NE 52nd Terrace
		Miami, FL 33137
MGR		Lucinda M. Alonso Arisso
		650 NE 52nd Terrace
		Miami, FL 33137
·		
(Use attack	hment if necessary)	
CLE V: Effective day	fective date, if other the	han the date of filing: (OPTIONAL e must be specific and cannot be more than five business ling.)
CLE V: Effective day	fective date, if other thate is listed, the date is after the date of file. ED SIGNATURE:	e must be specific and cannot be more than five business
CLE V: Effective day	fective date, if other thate is listed, the date is after the date of file. ED SIGNATURE: Signature of a (In accordance with sectionstitutes an affirmatic I am aware that any fals)	e must be specific and cannot be more than five business ling.)
CLE V: Effective day	fective date, if other thate is listed, the date is after the date of file. ED SIGNATURE: Signature of a (In accordance with sectionstitutes an affirmatic I am aware that any fals)	member or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true, the information submitted in a document to the Department of State

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)