

# L13000164643

Nov 22 2013 3:14 PM FAX

Division of Corporations

Page 1 of 1

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.**

((H13000257169 3)))



H130002571693ABC1

**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 : JOHN L. TOMLINSON  
Account Number : I19980000017  
Phone : (954) 771-9336  
Fax Number : (954) 771-9488

FILED  
13 NOV 22 PM 12:02  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***  
Email Address: John@JLTCPA.COM

FLORIDA LIMITED LIABILITY CO.  
MyBrickell 2201, LLC

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

RECEIVED

13 NOV 22 AM 8:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALLY  
EXAMINER

NOV 25 2013

Electronic Filing Menu

Corporate Filing Menu

Help

((H13000257169 3)))

## Articles of Organization

### ARTICLE I - NAME

The name of this Limited Liability Company is MyBrickell 2201, LLC.

### ARTICLE II - PRINCIPAL OFFICE

The street address of the initial principal office of this Limited Liability Company is:

500 NW 62<sup>nd</sup> Street, Suite 210  
Fort Lauderdale, FL 33309

The mailing address of the initial principal office of this Limited Liability Company is:

500 NW 62<sup>nd</sup> Street, Suite 210  
Fort Lauderdale, FL 33309

### ARTICLE III - DURATION

This Limited Liability Company shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

### ARTICLE IV - PURPOSE

This Limited Liability Company is organized for the purpose of transacting any or all-lawful business.

### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Limited Liability Company is 500 NW 62<sup>nd</sup> Street, Suite 210, Fort Lauderdale, FL 33309 and the name of the initial registered agent of this Limited Liability Company at this address is John L. Tomlinson.

### ARTICLE VI - MANAGEMENT

This Limited Liability Company is to be managed by a manager and is, therefore a manager-managed company. The name and address of the initial manager of this Limited Liability Company is:

Name  
Elena Kaneva

Address  
500 NW 62<sup>nd</sup> street, Ste 210  
Fort Lauderdale, FL 33309

Prepared by John L. Tomlinson, CPA, PA  
500 NW 62<sup>nd</sup> Street, Ste 210  
Fort Lauderdale, FL 33309

phone 954-771-9336

((H13000257169 3)))

FILED  
13 NOV 22 PM 12:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

((H13000257169 3)))

ARTICLE V - PRE-EMPTIVE RIGHTS

Every member, upon the sale for cash of any additions to Capital Accounts of the Limited Liability Company shall have the right to purchase his prorata economic interest thereof at a price at which it is offered to others.

ARTICLE VI - INDEMNIFICATION

The Limited Liability Company shall indemnify and hold harmless any manager or member to the full extent permitted by law.

ARTICLE VII - AMENDMENT

These Articles of Organization may be amended in the manner provided by law. Each amendment shall be approved by a majority-in-interest vote of the members at a meeting called therefore.

ARTICLE VIII REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENTS SIGNATURE

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 the 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 in Chapter 608, F.S.

John L. Tomlinson  
500 NW 62<sup>nd</sup> Street, Suite 210  
Fort Lauderdale, FL 33309



SIGNATURE  
(Resident Agent's Signature)



John L. Tomlinson

Signature of 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. 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.)

11/20/2013  
Date

((H13000257169 3)))