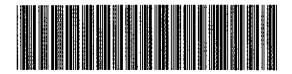
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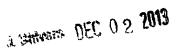
(Requestor's Name)	
(Address)	_
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(Addiess)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 19, 2013

AL HERNANDEZ 6916 N MILAM DAIRY RD MIAMI, FL 33166

SUBJECT: THIRTEEN THREE SEVEN LLC

Ref. Number: W13000063926

We have received your document for THIRTEEN THREE SEVEN LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the mailing address., THE MAILING MADRESS PLEASE FILE ASOF DATE LIS

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

Letter Number: 313A00026696

COVER LETTER

TO:	Registration Division of C			
SUBJE	CT:T	hirteen Three Seven Name of Limi	ted Liability Company	
The end	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please r	eturn all corres	pondence concerning this mat	ter to the following:	
-		Al Herna	ndez Name of Person	
-		Thirteen Three	Seven Firm/Company	
_		6916 N. Milam	Dairy Road Address	
		Miami, Fl 3		
_		Cit	y/State and Zip Code	
For furt	ner information	E-mail address: (to be used concerning this matter, please	for future annual report notification)	100 mm
		of Person	at () Area Code & Daytime Telepi	hone Number
	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	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 Ci Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:			
Thirteen Three Seven, LL (Must end with the words "Limited Li	.C. ability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited L	iability Co	ompan	y is:
Principal Office Address:	Mailing Address:			
6916 N. Milam Dairy Road Miami. Fl: 33166	14-4849 Coral Gables, Fl. 3311	<u> </u>		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent' gistered Agent. You must designate an indiv	's Signatu vidual or anot	re: her	
The name and the Florida street address of th	e registered agent are:		AUR SE	_5.5 17 - 45 1 - 41 4 - 12
Al Hernandez Nam	me	7	<u></u>	pre-
6916 N. Milam D Florida street	airy Road address (P.O. Box <u>NOT</u> acceptable)		÷ 6	A S
Miami	FL 33166	7.	9	
City,	State, and Zip			
Having been named as registered agent and liability company at the place designated is registered agent and agree to act in this cap all statutes relating to the proper and compand accept the obligations of my position as	in this certificate, I hereby accept to comply wo cative. I further agree to comply wo lete performance of my duties, and registered agent as provided for the contract of the	the appoin vith the pro d I am fam	itment ovisioi iiliar v	as ns of vith

(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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	•
WORW — Managing Memoer	
MGR	Irene Hernandez
	6916 N. Milam Dairy Road
	Miami. Fl 33166
MCD	Al_Hernandez
MGR	6916 N. Milam Dairy Road
	Miami, Fl 33166
	Markett .
(Use attachment if necessary)	
CLE V: Effective date, if other th	13 10v
CLE V: Effective date, if other the effective date is listed, the date to or 90 days after the date of fili	e must be specific and cannot be more than five business of ing.)
CLE V: Effective date, if other the effective date is listed, the date of filing or 90 days after the date of filing.	e must be specific and cannot be more than five business of ing.)
CLE V: Effective date, if other the effective date is listed, the date to or 90 days after the date of filion REQUIRED SIGNATURE:	member or an authorized representative of a member.
CLE V: Effective date, if other the effective date is listed, the date to or 90 days after the date of filisted and the effective date is listed, the date to or 90 days after the date of filisted and the effective date of a secondary secondary with section of the effective date of a secondary se	e must be specific and cannot be more than five business of ing.)
CLE V: Effective date, if other the effective date is listed, the date to or 90 days after the date of filist REOUIRED SIGNATURE: Signature of a secondarie with section constitutes an affirmation I am aware that any false constitutes a third degree.	member or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. e information submitted in a document to the Department of State

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