Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

Effective Date

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 : (305)633-9696 Fax Number

**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. LRET-41ST, LLC

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Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

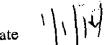
Help

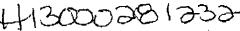
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EMPIRE CORP

12/23/2013





(γ)

ARTICLES OF ORGANIZATION FOR F	LORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is	ı:
LREY-418T, LLC	St. A. H. L. O. B. W. L. O. B.
(Must end with the words "Limited Liab	uny Company, "Lalles," or "Lales")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Malling Address:
169 East Plaglor Street	169 East Flegier Street
Penthouse	Penthouse
Miami, Florida 33131	Mismi, Florida 33191
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered business entiry with an active Florida registration.) The name and the Florida street address of the Elliott Hards, Esq.	istered Agent. You must designate an individual or mother .
Nam	0
111 SW 3 Street, 6th Floor	<u></u>
Plorida street a	ddress (P.O. Box NOT moceptable)
Miaml, FL 33130	. FL
City, 5	State, and Zip
	o accept service of process for the above stated limited

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

SECREDARY OF STALLAHASSEE FLOOR STALLAHASSEE FLOOR EMZ/EZ/ZI

EMPIRE CORP

H3000381333

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
маям	LAET-HOLDING, LLC
	169 East Fingler Street, Penthouse
	Miami, Florida 38181
(Use attachment if necessary)	
ICLE V: Effective date, if other than	the date of filing: danuary t, 2014 . (OPTIONAL)
	aust be specific and cannot be more than five business da
REQUIRED SIGNATURE:	

- - **-**

Signature of a member or an authorized representative of a member.

(in accordance with section 608.408(3), Florida Stanutes, 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 take information submitted in a document to the Department of State constitutes a third degree felony as provided for in z.817.155, F.S.)

Elliott Herris, Authorized Representative
Typed or printed game of signes

Filing Fees:

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

\$ 5.08 Certificate of Status (Optional)

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